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ABSTRACT

The education and related services provided by the Ohio Veterans' Children's Home (OVCH) to its 211 residents (ages 6 to 19) were evaluated. Children in the home arrive either by placement through a public agency or by private placement, and the average length of stay is about a year. Approximately half of the children appear to have severe psychiatric disorders. The evaluation identified four basic problems of the facility: (1) an unclear mission as to what it is to do, to whom, and why; (2) fragmented services with little coordinated planning for individual children and little communication among staff members; (3) emphasis on control rather than treatment, with staff focusing on making children adjust to the institution rather than preparing them for life in the community; and (4) isolation, especially the facility's geographic remoteness from its residents' homes, and staff isolation from current thinking and state policy. Recommendations to the Ohio General Assembly include, among others, identifying an appropriate and clear mission for the institution, requiring persons or agencies placing children in OVCH to bear the cost, and more oversight over its operations. An OVCH response and a 1993 update are attached. (DB)

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OHIO VETERANS' CHILDREN'S HOME

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May 1991

OHIO VETERANS' CHILDREN'S HOME

RR-91-03

SUMMARY

OHIO VETERANS' CHILDREN'S HOME

The Legislative Office of Education Oversight (LOEO) evaluated the education and related services of the Ohio Veterans' Children's Home (OVCH), established in Chapter 5909. of the Ohio Revised Code.

This is an LOEO report to the Legislative Committee on Education Oversight. ***Conclusions and recommendations in this report are those of the LOEO staff and do not necessarily reflect the views of the Committee or any of its members.***

OVCH is a 500-acre residential facility and school located in Xenia. The Home is supported almost exclusively by state General Revenue Fund appropriations, amounting to almost $15 million for the current biennium.

LOEO examined the adequacy of the education and supporting services OVCH provides to its residents. To do this, we compared what we found at OVCH with various legal standards, and with programs at other facilities in Ohio serving similar children.

Our analysis of OVCH's operations and programming disclosed four basic problems with the facility:

- Unclear mission--OVCH as an institution appears unclear about what it is to do, to whom, and why;
- Fragmented services--there is little coordinated planning for individual children and little communication among staff members;
- Emphasis on control rather than treatment--the staff's efforts are directed toward controlling the children's behavior and making children adjust to the institution, rather than preparing children for life in the community; and
- Isolation--the facility is geographically remote from most of its residents' homes, and its staff appears isolated from current thinking and even basic state policy in child care and education.

CHAPTER II - OVERVIEW

As of February 1991, there were 211 residents in OVCH, ranging in age from six to 19. The residents arrive from one of two basic sources: public agencies (including public children's services agencies and juvenile courts) and private placements by individual parents or guardians. Approximately 65 percent of OVCH residents were placed by parents or guardians. The average length of stay for children at OVCH is a little over a year.

OVCH's admissions process results in accepting two very different types of children. LOEO's review of current residents' files found that over half had identified serious psychiatric disorders; such children require treatment, not just room and board and school. For one third of the children in our sample, there was no evidence of especially severe problems. These children may not be appropriately placed in a residential facility.

CHAPTER III - OVCH AS A SCHOOL

OVCH operates its own elementary and secondary school. Its curriculum is more limited than that of a small public school district. A 1986 Ohio Department of Education (ODE) evaluation found the school out of compliance with 25 of 155 specific requirements. OVCH did not submit the required compliance plan and ignored ODE follow-up requests. A February 1991 ODE site visit found the school out of compliance with 13 standards--eleven remaining from 1986 and two new ones.

Although section 5909.08 of the Ohio Revised Code requires that the OVCH vocational program "shall be . . . considered a model school," three of its vocational courses of study were recently disapproved by ODE.

LOEO found the school emphasizing control and punishment and providing little individualized instruction, despite having only eight to 11 students per class.

Special education

Under state and federal laws, all handicapped children have a right to a free, appropriate, public education. Although OVCH believes it is exempt from this requirement, section 3323.091 of the Ohio Revised Code requires OVCH to establish special education programs for handicapped students.

Although OVCH does not attempt to identify handicapped children, the teachers interviewed and the files reviewed by LOEO revealed many students with learning problems. These include learning disabilities and behavioral and emotional difficulties which interfere with learning.

No members of the school faculty are certified as having the expertise to address these learning needs. None is certified to teach children with learning disabilities or behavior disorders.

CHAPTER IV - OVCH AS A RESIDENTIAL FACILITY

OVCH is operating in direct conflict with state policy regarding troubled children, as expressed in S. B. 89 of the 118th General Assembly. Rather than working to reunite children with their families, OVCH tries to keep children in the Home as long as possible.

A 1987 Opinion of the Attorney General declared OVCH exempt from policies and standards of the Ohio Department of Human Services (ODHS) regarding residential facilities. The treatment needs of most of OVCH's residents, however, are similar to those of children in other residential facilities. Our review of OVCH student files found that 39 percent of the children had been receiving fairly intensive mental health services before being placed at OVCH. We found no evidence that these children were receiving the same level of service at the Home.

Rather than treatment, OVCH's focus is on control of children. In addition, there is little communication among the school, cottage, and social service staff regarding the needs of individual children.

CHAPTER V - CONCLUSIONS AND RECOMMENDATIONS

LOEO finds that the Home's central problem is its lack of a clear purpose. OVCH has not been able to settle on an identifiable target population, and has not consistently provided adequate services to the children it admits.

LOEO recommends:

- **The General Assembly direct the state Interdepartmental Cluster for Services to Youth to study the possible missions of OVCH and make recommendations to the General Assembly as to the Home's mission, governance, target population, staffing and budget needs, and funding sources.**

- **The Home should not be redefined or restructured in such a way as to duplicate services available from private facilities. The redefinition or restructuring should assume no increase in total state appropriations for the Home. The General Assembly should temporarily prohibit OVCH from accepting any new children until legislation implementing the Cluster's recommendations has been adopted.**

OVCH should temporarily be made an operating unit of ODHS, at least until the Cluster's recommendations have been implemented.

LOEO recommends:

- **Persons or agencies that place children in OVCH should bear the cost of the children's care, and that the General Assembly require OVCH to begin immediately to maximize payments from federal and third-party sources.**

The isolation of OVCH from current trends and state policies in education and child welfare has been brought about in part by lack of oversight by state government, parents, and others. Requiring payment will improve accountability by heightening the interest of children's custodians in what services are provided.

LOEO recommends:

- The General Assembly require the agency administering the facility to conduct formal studies designed to ensure that the Home continues to fulfill a specific role in Ohio's child welfare system, that it operates effectively and efficiently, and that its functions do not duplicate those available from the private sector. Studies should occur one year after the restructuring is implemented; again two and four years later; and after that, every eight years.

- The General Assembly require OVCH to obtain an ODHS license as a children's residential facility. The General Assembly should also require OVCH to have a special education plan, as all local school districts must.

- The General Assembly consider whether the school children might be better served if OVCH's school program were operated by Xenia's city school system.

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CHAPTER I

INTRODUCTION

The Legislative Office of Education Oversight (LOEO) serves as staff to the Legislative Committee on Education Oversight. Created by the Ohio General Assembly in 1989, the Office conducts studies of education-related activities funded wholly or in part by the state of Ohio. This Research Report evaluates the education and related services of the Ohio Veterans' Children's Home (OVCH), established in Chapter 5909. of the Ohio Revised Code.

This is a report of the Legislative Office of Education Oversight to the Legislative Committee on Education Oversight. ***Conclusions and recommendations in this report are those of the LOEO staff and do not necessarily reflect the views of the Committee or any of its members.***

BACKGROUND

The Ohio Veterans' Children's Home (OVCH) is a 500-acre residential facility and school located in Xenia. The Home is supported almost entirely by state General Revenue Fund appropriations, amounting to almost $15 million for the current biennium.

As of February 1991, there were 211 residents in OVCH, ranging in age from six to 19. Sixty-two percent of the residents were male and 38 percent were female. Although the Home's admission summary form lists only "White" and "Non-White" as racial categories, Home officials identified 171 of the 211 children as white, 38 as black, one as South Asian Indian, and one as "Italian." The average length of stay for children at OVCH is a little over a year.

OVCH residents arrive from one of two basic sources: public agencies (including public children's services agencies and juvenile courts) and private placements by individual parents or guardians. Approximately 65 percent of OVCH residents were placed by parents or guardians; for about a third of these, OVCH had been suggested by courts or agencies. The remaining children were placed in OVCH directly by courts, agencies, or both, depending on the procedure in the particular county having custody of the child.

OVCH in the education system

The Woodrow Wilson School is located on the grounds of OVCH. Its staff are state employees. The high school is chartered by the state and is supposed to meet all

the same curriculum, facility, and staffing requirements as any public school. The school's children are distributed across grade levels approximately as follows:

* 10 children in grades 1-3
* 30 children in grades 4-6
* 40 children in grades 7-8
* 130 children in grades 9-12

OVCH in the child welfare system

The state's overall policy on dealing with troubled children and their families is expressed in Amended Substitute Senate Bill 89 of the 118th General Assembly. S.B. 89 requires that considerable effort be directed toward keeping families together, reunifying families as soon as possible if they must be separated, and finding permanent adoptive homes for children if reunification is not possible.

Children are to be placed in the least restrictive environment that meets their needs, and as close to home as possible. In an effort to preserve the family, children's service agencies would first provide therapy to the entire family to allow the child to continue living at home.

Residential facilities, such as OVCH, should be used only for children who need a highly structured setting where intensive treatment is available. Usually, this means that placement in a residential facility is a last resort.

Children in residential facilities typically have serious behavior or emotional problems and require special education services. A residential facility would therefore be expected to provide a fairly high level of psychological or psychiatric treatment, often including therapy or support groups, as well as highly individualized instruction in its school. OVCH does not provide these services.

General observations

OVCH may provide a better home for some of its residents than the ones from which they came. There is certainly some benefit to providing meals, shelter, and caring adults for a child who has been without them; several children confirmed this during our visits. However, our analysis of OVCH's operations and programming disclosed four basic problems with the facility:

- Unclear mission--OVCH as an institution appears unclear about what it is to do, to whom, and why;
- Fragmented services--there is little coordinated planning for individual children and little communication among staff members;
- Emphasis on control rather than treatment--the staff's efforts are directed toward controlling the children's behavior and making children adjust to the institution, rather than preparing children for life in the community; and
- Isolation--the facility is geographically remote from most of its residents' homes, and its staff appears isolated from current thinking and even basic state policy in child care and education.

The report uses many examples to illustrate the situation we found at OVCH. Some of the examples, considered individually, will not seem remarkable; they could be found in any school, or in any residential treatment facility for children. Finding all of them in one place is, in our opinion, unusual.

However, OVCH is not simply a facility with a list of correctable deficiencies or minor technical violations. Examples in the report--selected from many similar ones in our files--are demonstrations of basic, underlying problems.

SCOPE AND METHODS

LOEO examined the adequacy of the education and supporting services OVCH provides to its residents. To do this, we compared what we found at OVCH with various legal standards, and with programs at other facilities in Ohio serving similar children.

LOEO's research was directed to the general issue of whether OVCH is the best use of state funds to meet the education and related needs of these children. To address this general issue, we focused on three specific questions:

1. What types of children are residents of OVCH, and what are their education and service needs?
2. Are OVCH's education and other policies and programs consistent with minimum state standards and comparable to those of similar facilities, even though OVCH does not formally seek a license?

3. Are there changes in OVCH's mission or policies that would be advantageous to the Home's residents and to the state as a whole?

Methods and data sources

LOEO made three separate visits to OVCH, during which we:

* collected statistics;
* interviewed residents, staff members of all types, and senior administrators;
* observed classes and other activities; and
* reviewed the files of current and former residents.

LOEO interviewed a total of 49 people during the three visits to OVCH, some of them more than once. These included ten teachers, 20 students, and three houseparents, all randomly selected. We also interviewed four social workers and 12 other staff members.

LOEO reviewed files of 39 current residents of OVCH, 19 percent of the Home's population. Thirty of these were chosen randomly; the remaining nine were selected because the children were assigned to a special classroom. We also reviewed the school files of four randomly selected students discharged in 1990.

LOEO staff contacted the public children's services agencies in seven Ohio counties from which six or more OVCH children had come. For children placed in OVCH by the agency, we asked what criteria the agency used in deciding on the placement, what other placements had been considered, and how the agency was complying with the S.B. 89 requirements.

Since there are no other state-operated facilities comparable to OVCH, we visited and conducted interviews at two privately owned residential facilities licensed by the Ohio Department of Human Services (ODHS). We also interviewed a third facility's administrator by telephone. All three facilities have schools located on their campuses.

We did not evaluate these other facilities. They were used to provide information on the policies, programs, and practices of a licensed residential treatment facility. The resulting information was then compared to our findings from OVCH. As is our policy, we promised these facilities anonymity in our report.

A recent study sponsored by the OVCH Board of Trustees also provided valuable information and suggestions about the Home. The Study Committee included business people, juvenile court judges, a children's services board director, a graduate of OVCH, a former superintendent, a member of the Board of Trustees, and a representative of Ohio veterans.

In addition, LOEO consulted with and received information from ODHS child welfare staff, staff in the Ohio Department of Education (ODE), and representatives of private child welfare organizations. We also reviewed a number of documents from OVCH as well as related materials from other sources.

LOEO appreciates the assistance of all those who spent time with us, particularly the residents and employees of OVCH.

Report organization

Chapter II presents an overview of OVCH, including its administration, staffing and admission policies. Chapter III describes OVCH as a school, including both its overall education programs and its special and remedial programs. Chapter IV describes OVCH as a residential facility, including treatment services. The final chapter provides conclusions and recommendations. The Appendix contains OVCH's response to this report. It is preceded by the LOEO staff's comments on the response.

CHAPTER II

OVERVIEW

The Ohio Soldiers' and Sailors' Orphans' Home (OSSO) was established in 1869 to care for the orphaned and dependent children of Ohio's Civil War veterans. A 1978 law changed the name to the "Ohio Veterans' Children's Home."

Statutory admission criteria require the child's mother or father to have served honorably in a branch of the armed forces. Children of any Ohio resident can be admitted to available space after the needs of veterans' children have been met. Currently, OVCH officials say about 65 percent of the Home's residents are the children of eligible veterans. However, veteran status does not enter into the Home's admission decisions.

ADMINISTRATION

OVCH is administered by a five-member Board of Trustees appointed by the governor. The Board is solely responsible for developing or approving policies and procedures, and appoints the superintendent to act as the chief administrator of the Home.

Staffing

Immediately responsible to the superintendent is an assistant superintendent. Reporting to the assistant superintendent are three department directors--direct services (including residential, medical, and social services), education, and maintenance.

Five social workers are employed at the Home; three have bachelor's degrees and two have master's degrees. All meet the requirements to become licensed social workers or licensed professional counselors. The Home has a full-time psychologist and a psychiatrist who works ten hours a week.

Woodrow Wilson School has 34 classroom teachers. Four teach at the elementary level, 21 teach at the secondary level, and nine are vocational teachers.

There are 21 cottages located on campus, 11 of which are closed. Each of the open cottages has one houseparent for the day shift and one for the night shift.

A small clinic is located on campus and is staffed by two registered nurses, two licensed practical nurses, and a hospital aide. The Home contracts for services with a physician who is on call, a dentist, an eye doctor, a pharmacy, and a laboratory.

Finances

Based on the average OVCH population (220 children during FY 1990), the Home's cost per child per year is approximately $35,000. This cost is much lower than that of the private, nonprofit residential facilities LOEO visited. The average cost per child per year for one of the facilities is approximately $90,000; the average cost per child per year for the other facility is approximately $43,000.

There are two major explanations for this difference. First, the populations at the other two facilities are much smaller than OVCH's--70 to 80 children each. A smaller population means the overhead and fixed costs are distributed over fewer residents. Second, the other institutions, unlike OVCH, provide services, staff, and facilities that meet or exceed regulatory standards for their educational, residential, and treatment programs.

Sources of revenue differ as well. OVCH operates almost entirely on state General Revenue Fund appropriations; there is no charge to place a child in OVCH. Private facilities rely primarily on fees paid by public agencies placing children in the facilities. However, they also use federal Supplemental Security Income, Medicaid, and child welfare funds, as well as reimbursements from insurance carriers.

Broadening the funding base does more than provide money. Many funding sources enforce quality requirements that a facility must meet. State and federal agencies and private third-party payers often closely scrutinize a facility's programs to ensure that the children are making progress. Thus, expanding the funding base is a way of enhancing a facility's overall accountability for the quality of its services.

ADMISSIONS TO OVCH

OVCH has complete discretion over whether to accept a child from any referral source. The Home has four social service staff members (referred to as "field representatives") located throughout the state. They screen out those who are not deemed suitable for OVCH, and refer the rest to an admissions committee at the Home. The committee makes a recommendation to the superintendent, who may agree or

overrule the committee. OVCH officials estimate this three-step process results in screening out eight of every ten potential residents.

The statute specifies that the Home can accept children up to age 18, and may keep older children for an additional period to enable them to complete their high school program. Senior OVCH staff members say the current purpose of the Home is to provide 24-hour care to "dependent, neglected, deprived, and abused children."

OVCH officials, like those at other residential facilities, say the Home does not admit children whose needs cannot be met by the facility's programs. For example, many facilities will not accept children who have acute, severe psychiatric disorders, who have active drug or alcohol addictions, or who require a locked and secure facility. OVCH officials report similar restrictions, and say they also try not to accept children with severe behavior problems, who are adjudicated delinquent, or who are very sexually active. OVCH officials say they are also reluctant to take older children who are not likely to accumulate enough academic credits to finish high school before turning 18 or 19.

However, in our review of 39 files of current residents, we found evidence of children with multiple needs. Over half (56 percent) had identified psychiatric disorders, including such diagnoses as "chronic depression" and "developing borderline psychotic"; most of these were diagnosed by OVCH's own psychiatrist. In addition, prior to coming to OVCH, 39 percent received mental health services, 56 percent had some involvement with the juvenile courts, and 39 percent received child protection services. Such children require treatment, not just room and board and school.

OVCH officials assert that most of their residents have had many foster care placements and that the Home is the "last chance" for many of them. However, for one third of the children in our sample, there was no evidence of especially severe problems. These children may not be appropriate for placement in a residential facility. About half of OVCH residents have never been placed out of their homes before coming to the Xenia facility.

We found that OVCH's admissions process results in accepting two very different types of children. One group, if they had support services provided to them and their families, probably would not be placed outside their homes. The second group needs coordinated and therapeutic services; to obtain such services, residential placement might be necessary. As examples of these extremes, we noted children for whom OVCH was

their first out-of-home placement and a child who came directly from three consecutive inpatient stays at psychiatric hospitals.

Other residential facilities, including the two private residential facilities LOEO visited, serve specific populations. Their admission policies, staffing patterns, and programmatic decisions all focus on the needs of specific types of children. The admissions policies of OVCH, on the other hand, result in the admission of children with a broad range of needs. The result is that the Home's resources are dispersed rather than targeted.

The OVCH Study Committee Report recommends that OVCH establish a much clearer identity, notably in terms of the type of children it admits, and provide the full range of clinical, educational, and other professional services needed to meet the needs of those children.

Reasons for placement

Almost two thirds of the children at OVCH were placed there by their parents or guardians, rather than by courts or public agencies. For a residential facility, this is a very high proportion of family placements. Few parents can afford the cost of residential care. However, there is no charge to parents who place their children in OVCH.

The rest of the Home's children were placed by courts or agencies. We asked public children's services agencies about these placements. Most said they were more likely to use OVCH for older adolescents when neither family reunification nor adoption was considered likely. One county representative said the agency looks at its budget in determining where to place any child; another said, "the fact that the facility is free is the reason we place children there."

Length of stay

The intent of the Home is to try to require children to stay at least two years, and until high school graduation if possible. In practice, most children stay less than a year. One third of them stay less than six months. According to OVCH officials, about 75 percent of current residents had been at OVCH less than 18 months. The average length of stay before discharge is somewhat longer than a year, but this is because a few children stay for five or six years.

Thus, while the census at any one time is about 200, there will be almost 200 discharges in any one year. Children placed in OVCH by child welfare agencies are only temporarily out of their local out-of-home placement systems.

OVCH discharged 189 children in 1990. Of these, 35 percent were reunited with their families; 34 percent were discharged for disciplinary reasons; 17 percent were emancipated or went to an alternative placement, such as a foster home or group home; and 14 percent graduated from OVCH's high school.

CHAPTER III

OVCH AS A SCHOOL

The Woodrow Wilson School at OVCH serves children in grades 1 through 12. Its teachers and administrators are state employees. The school's physical plant includes three buildings: elementary classrooms in part of an unused cottage, a vocational building, and an academic building. These buildings are approximately 60 years old.

The school's charter, issued in 1961, says the "Woodrow Wilson OSSO Home High School" is a regularly constituted four-year high school. The Ohio Department of Education reports that it categorizes Woodrow Wilson as a "special purpose school." As a special purpose school, Woodrow Wilson could apply for exemptions from certain minimum standards. This has not been done, so the OVCH school is required to provide all of the same programs and resources and to meet all the same requirements as any public school district in Ohio.

At both other residential facilities we visited, the schools on the grounds are operated by the local public school district. Teachers in the facility's school are employees of the local school district and the school itself is chartered and accredited as part of the local district.

This means that faculty and staff of these residential schools have access to all the district's instructional resources and expertise. For the students, it means they have immediate access to the schools of the regular district; they can attend those schools for all or part of the day, and can participate in athletic and other extracurricular activities.

OVCH'S GENERAL SCHOOL PROGRAM

The curriculum at OVCH is similar to what would be found at a small public school district, with some exceptions. There are no laboratory science courses, and all high school students must take Junior Reserve Officers' Training Corps (R.O.T.C.).

We reviewed OVCH's overall educational program in two ways. First, we examined the records of ODE inspection visits. These visits are conducted every five years to determine the school's compliance with the state's Minimum Standards for Elementary and Secondary Schools. Second, we interviewed OVCH students, teachers, and other staff members.

OVCH itself has no data on the effectiveness of its school program. Officials told us that most children were one to three years behind grade level when admitted. However, OVCH does not assess children upon departure to determine whether the Home has helped to close this gap.

Compliance with standards

A May 1986 ODE evaluation found that the school was out of compliance with 25 of 155 specific requirements. The school was directed to submit a corrective action plan in October 1986, but did not do so. ODE made four follow-up telephone calls and two additional visits between August 1987 and November 1988 to pursue compliance. There was no response from OVCH.

In 1989, the school began taking steps to address the 1986 findings. During the 1989-90 school year OVCH began to contract with the Greene County Board of Education for some services, including driver education, use of film and videocassette library, staff development programs, and involvement in curriculum writing and revisions. As of the 1990-91 school year, Greene County also provides speech and language services.

In February 1991, ODE conducted another site visit and found the school out of compliance with 13 standards--11 remaining from 1986 and two new ones. Fifteen of the 25 violations from 1986 have been corrected.

Examples of requirements still unmet include:

* seven teachers and school administrators are working outside of their areas of certification, compared to three in 1986;
* the school does not offer any laboratory science or enough foreign language courses;
* the school has not submitted courses of study for the required ODE approval;
* there is no evidence of fire or tornado drills; and
* the Board has not formally adopted all required policies.

LOEO observations and interviews

OVCH staff note that an advantage of the Home is its very small classes, typically 8-11 students. One of the key benefits of small classes is that teachers could plan different lessons for different students, lessons designed for the child's individual needs.

LOEO observed classes, interviewed teachers and reviewed lesson plans to find out whether teachers were offering individual attention and instruction. In most of the 12 classes we observed, all students were working on the same assignment; few teachers had prepared lessons tailored to the needs of individual students. However, teachers in some classes moved about the room providing individual attention.

LOEO was able to ask 11 secondary students at OVCH about their views of the school. Three had positive things to say, noting they were able to get help with their work. Eight described the school negatively, mostly because it was "too easy." Four said they were being taught material two years behind their grade level, compared to the material from their previous schools. One said "challenge" was missing.

VOCATIONAL PROGRAMS

In addition to its obligation to meet the general ODE standards for vocational education, OVCH has a specific responsibility in statute. Section 5909.08 of the Ohio Revised Code requires that the Home's vocational program "shall be taught and practiced in so thorough and comprehensive a manner that the institution shall be considered a model school."

Currently, all eleventh and twelfth graders at OVCH are in the vocational track, spending the morning of each day in one of six courses: automotive, business, carpentry, cosmetology, graphic arts, and horticulture.

According to the principal, the school will try to find academic courses elsewhere for students who demonstrate that the vocational track does not meet their needs. Last year they had five such students. More typically, the principal said, the school attempts to steer students with college aspirations into business courses in the vocational track.

All ninth graders take home economics. Tenth grade students are exposed to each of the six vocational course areas so they can select one for the subsequent years. Tenth graders also receive a battery of vocational preference and aptitude tests through the Greene County Career Center.

We noted some bright spots in OVCH's vocational programs. The graphic arts class we observed was doing advanced work in using a computer to lay out the Home's newsletter. We also noticed a high level of student interest in the automotive shop.

However, despite the statutory requirement to be a "model" vocational school, three of the latest vocational education courses of study (graphic arts, automotive, and carpentry) did not meet Ohio Department of Education criteria for approval. The OVCH Study Committee Report recommends that OVCH consider sending eleventh and twelfth graders to the Greene County Career Center.

SPECIAL AND REMEDIAL EDUCATION

Most public schools offer at least two forms of assistance to students who are having difficulty learning. Remedial support is offered to students who have fallen behind and need additional help, alone or in small groups, to catch up on specific subjects. Federal funding under the "Chapter 1" program is often used to provide remedial support in reading and mathematics. Remedial programs are not intended for children with handicaps.

Special education services are provided in most public schools to children who have a handicap that interferes with learning. The handicap may be visual, hearing, or due to chronic or acute health problems, such as a heart condition or leukemia; it may be significantly reduced intellectual functioning, resulting in a developmental handicap, or mental retardation.

The handicap might be a disorder of a physiological process needed to understand or use language. Such handicaps result in a specific learning disability. Examples of specific learning disabilities include dyslexia, problems with perception, and minimal brain dysfunctions. Children may have severe behavior handicaps, meaning they continually have trouble getting along with peers and teachers, or otherwise behave inappropriately to the point that their ability to learn or function in school is impaired.

Special education requirements

State and federal laws provide that all handicapped children have a right to a free, appropriate, public education. Every public school district in Ohio must have a plan for ensuring that all handicapped children are identified and served.

Section 3323.091 of the Ohio Revised Code specifically says the OVCH Board "shall establish and maintain special education programs for handicapped children . . .

according to standards adopted by the state board of education," and authorizes OVCH to apply for funding for such programs.

Under state and federal special education laws, every child--including every child in OVCH–has a right to:

* A "multifactored evaluation," as soon as anyone suspects the child may be handicapped, to determine whether the child is handicapped, and if so, what educational and related services the child needs;
* An "individualized education program" (IEP), a written statement that tells how the child's needs will be met; the IEP must be based on the child's needs, not on available services, and parents must be offered the opportunity to be involved in preparing the IEP; and
* Education and related services in accordance with the IEP, provided by specially trained and qualified teachers and other personnel.

These procedural requirements not only provide a way to plan services; they also provide accountability. The multifactored evaluation and IEP are the vehicles that assure the child's family that the child's needs are being met, and also protect the school and teacher from charges that they are not providing the education and related services that are every child's right.

Needs of OVCH children

The Woodrow Wilson School at OVCH is the only public elementary and secondary school in Ohio that is not covered by a special education plan filed with ODE. The Home's admissions policies are supposed to screen out children who need these special education services, according to OVCH officials.

However, all ten teachers we interviewed paint a different picture of the educational needs of OVCH children. They describe their students as having a wide variety of special needs, including many that would be addressed by formal special education programs "if they were in a public school."

OVCH teachers describe some of their students as having learning disabilities (including dyslexia and problems with comprehension and retention), severe behavior handicaps, attention deficit disorders, or emotional problems which get in the way of learning. They also say some students need remediation in reading, math, spelling, listening, writing, and study skills.

One teacher told us that he suspects some students have learning disabilities, but he cannot arrange for them to be identified or evaluated because "the official party line is 'we don't have LD [learning disabled].'" LOEO reviewed a 1989 OVCH roster of students on which the OVCH staff had identified 29 percent of the students as "possible LD."

Of the student files LOEO reviewed, 28 percent had received special education services or had an IEP within a year before entering OVCH and 39 percent had received mental health services. We found children with learning disabilities, severe behavior handicaps, developmental handicaps, and severe emotional disorders. A number of files describe students' needs for supportive and distinctive instructional programs tailored to their unique strengths and weaknesses.

OVCH special education program

Although the students have special needs and many have suspected handicaps, no members of the Woodrow Wilson faculty are certified as having the expertise to address these learning needs. None is certified to teach children with learning disabilities or behavior disorders. One teacher is certified to teach developmentally handicapped students. Teachers receive no special training or systematic staff development activities to help them address special academic and emotional needs.

The OVCH Education Administrator said, "We don't do special education." He said although OVCH does have special classes, they are nothing like those the public schools offer.

OVCH administrators say an ODE special education official told them the Home is exempt from meeting statutory procedural requirements, such as multifactored evaluations and IEPs. The same official told us, in an interview, that because OVCH is not a school district, it need not file a special education plan; and because OVCH has chosen not to receive federal or state special education funding, ODE will not review the Home's special education activities. However, he later said he believes OVCH "is required to meet federal and state special education laws."

Virtually all of what OVCH calls "special education" consists of remedial reading funded through a federal Chapter 1 allotment for institutions serving neglected and delinquent youth. The OVCH staff had prepared a local form called an IEP for some students. In all cases, these forms suggested only Chapter 1 reading or math services for these children.

Approximately 40 percent of OVCH students receive Chapter 1 services, almost three quarters of them in reading. The reading program focuses on remediating reading deficiencies. Although many children need this, the program is not designed for children with specific learning disabilities, or with emotional or behavioral problems that interfere with learning.

Twenty-five elementary school children are enrolled in a Chapter 1 sensory-motor program; it is likely these children have learning disabilities. There was a remedial mathematics program until the teacher resigned in November 1990. The school does not plan to replace this teacher.

Under contract, the Greene County Board of Education provides a speech and language therapist two days per week. The service includes both assessing and instructing students.

Room 209

Although it was not identified as such by any of the education administrators, teachers told us about Room 209, which its teacher described as "the closest thing to an LD class we have." Even this specialized classroom does not clearly target the children assigned there; has no procedural safeguards to ensure appropriate assignment; and lacks a teacher certified to work with most of the children.

We found nine students from grades 6-12 assigned to this room for a portion of the school day. The teacher, certified to teach developmentally handicapped children, provides individual instruction to these nine students. Five of these also receive Chapter 1 services.

The teacher told us students in Room 209 are there for both academic and social reasons. Some are described as not functioning academically in the regular classroom; others cannot manage socially, either because they are disruptive or because they are disrupted by others.

High school students are assigned to the room based on the particular credits they need toward graduation. For example, a student who needs a social studies credit, but finds the regular textbook too difficult, may receive social studies instruction using a lower-level textbook in Room 209.

The teacher explained that two of the sixth-graders assigned to Room 209 are not there because they have learning disabilities, but because they are more advanced than

the other six sixth-graders. The sixth-grade classroom teacher felt they would be held back in her class of lower-functioning students.

LOEO reviewed the files of all nine children assigned to Room 209. Five of the nine appear to have been classified as having specific learning disabilities and were receiving special education services before coming to OVCH. Two of these have some evidence of mental retardation due to brain injuries. The records of two other students suggest that a multifactored evaluation would disclose specific learning disabilities. Another child has evidence of needing remedial work but no indication of a learning disability, and finally, one child is performing above average work.

Comparison with other residential facilities

The two private residential treatment facilities we visited say their schools are explicitly designed to meet the needs of severe behavior handicapped youngsters, and see the educational program as an integral part of the children's treatment.

These facilities are required to meet all state and federal special education standards. Both schools, through their respective local school districts, have Severe Behavior Handicapped units funded by ODE. One school also has a Developmentally Handicapped unit. The staff of the schools have specific training in teaching the types of students who are in those schools. Most teachers have multiple certificates, and almost every one has a Severe Behavior Handicapped and Specific Learning Disabled certificate.

Both facilities say they try to adapt the school to the needs of the students, rather than trying to force the students to fit the institution. In one facility, each new resident spends one to two weeks with a diagnostic teacher. During this time the student is given a battery of academic diagnostic tests to identify strengths and weaknesses, and is started on subject matter instructional materials so the diagnostic teacher can observe how the child approaches the work. Classroom teachers use this information to design individual lessons for the child.

Both facilities coordinate school with all other aspects of treatment. Teachers meet regularly with cottage staff to discuss the treatment and progress of individual students. The cottage staff is considered a part of the school staff and is available during the day in the classrooms. In one facility, residential staff function as teachers' aides and are expected to be alert to the specific educational needs identified for each student.

CHAPTER IV

OVCH AS A RESIDENTIAL FACILITY

OVCH is more than just a school. As a residential facility for children, it is a total living environment. Thus, it is impossible to evaluate OVCH's education programs without considering how the facility's other services enhance or detract from its educational mission. It would be equally impossible to evaluate OVCH's social services activities without reference to the educational program. Coordination of all services is crucial for any of the services to be effective.

As with education, there are state policies and professional standards to which OVCH's non-educational services must adhere. However, OVCH has been held by some authorities to be exempt from these standards. For example, section 5909.02 of the Ohio Revised Code requires the Home's Board of Trustees to "govern, conduct, and care for such home, the property, and the children therein as provided in the laws governing the department of human services so far as they are not inconsistent with the laws governing such home." A 1987 Opinion of the Attorney General held that OVCH is exempt from all ODHS child welfare and facility licensing regulations.

Nonetheless, these regulations and the underlying statutes represent the child welfare policies of the state of Ohio. Even if OVCH is exempt from the specific requirement to hold a license, it is still reasonable to expect the Home to conform to the state's expressed policies and minimum standards. Therefore, LOEO has used these policies and standards to evaluate the quality of services OVCH provides to its residents.

MENTAL HEALTH AND SOCIAL SERVICES

Both private facilities we visited operate active therapy and support groups, especially for victims of abuse and for residents with drug or alcohol problems. At one home we visited, group therapy occurs five days a week in residential cottages.

Both facilities stressed programs that built self-esteem and independent decision-making among their residents. One facility instructs its staff, "the child needs not only order, control, treatment, and education, but also fun, success, and pride."

The needs of OVCH's residents are similar to those of the children in other facilities. Our review of OVCH student files showed that 39 percent of residents had been receiving fairly intensive mental health services before being placed at OVCH.

However, we found no evidence that they were receiving the same level of services at the Home. "OVCH is not a treatment facility," according to one senior staff member.

We found at least one student who had attempted to commit suicide shortly before our visit, but we found no evidence that the student was receiving any more treatment than other students. There was no mention of the attempt in the student's file at the school psychologist's office, although he knew about it. Several members of the staff noted a need for more mental health services at OVCH, as did the Home's recent Study Committee Report.

OVCH's atmosphere is one in which control is substituted for treatment. Any residential facility for troubled children must exercise control over residents; otherwise treatment would not be possible at all. However, OVCH's Study Committee Report noted that "Treatment is often considered control over a child," and suggested, "The expression of symptoms should be considered an opportunity to help a child achieve greater self-understanding and self-control rather than a stimulus to repress and suppress."

At OVCH, approximately 25 percent of the students are in after-school detention every day, according to the principal. In addition to after-school detention, Woodrow Wilson School holds evening school suspension, Saturday school suspension, and in-school suspension. The student handbook says a student can be sent to in-school suspension for: vulgar language, possessing dangerous objects, public display of affection (OVCH has a detailed policy describing allowable physical contact), chronic misbehavior, physical assault on other students or staff members, alcohol or drug abuse, damaging property, or insubordination.

A professional employee of the Home described what he saw as the institution's strengths:

> There's a lot of structure here. You're always observed and monitored. You can't go anywhere without a pass that's properly signed. You can't get into trouble as easily . . . . The main holdup here is the kids themselves. They just don't take advantage of it. If a bright kid comes here and wants to take advantage of everything, it's a gold mine.

On the other hand, a high school student at the Home says:

> A lot of the motive of the Home is that they are supposed to help you and they don't. The way you are expected to live here doesn't help you when you leave. Everything is laid out for us--it's all 'this way'--there is nothing you can do to change it, to make life better. When you leave and get an apartment, you'll have to work things out there, but have no practice here. You are not given any responsibility to manage anything; everything is done for us.

The Study Committee Report suggested a mental health plan for each resident, and noted the need for such groups as Alcoholics Anonymous, Alanon, and Alateen, as well as support and therapy groups for victims of abuse. None of these services is currently offered at OVCH.

The Study Committee Report further suggested a family treatment program, in which OVCH clinical staff would meet twice monthly with the parents of OVCH residents. This is especially important at OVCH, because so many of the children were placed there by parents.

Reunification efforts

Because the Home's staff believe its children come from families that cannot or should not be reunified, the staff makes no special effort to help families reunite or agencies comply with S.B. 89. The Home has recently begun sending quarterly progress reports to agencies and courts, but not to parents.

Both private nonprofit facilities have goals that seek to provide treatment so the children will be able to return home or at least function in a less restrictive environment. In fact, one facility starts planning for a child's return to the community during the admissions process.

The Home's Study Committee Report suggested that OVCH begin to comply with the intent of S.B. 89. The study team recommended that all applications be referred first to the local juvenile court or public children's services agency to see whether institutional placement is needed at all.

Discharge planning and follow-up

Professionals at both of the other facilities we visited stressed that shorter stays make careful discharge planning essential, to ensure that children do not simply return unprepared to the same harmful environments they left. In fact, the entire social services department at one of the facilities is referred to as the "aftercare" staff to stress that the program's focus is to help children acquire the skills they need to leave the residential facility and succeed in the community when they return.

Section 5909.16 of the Ohio Revised Code requires that the board "keep in communication with discharged pupils to enable the board to report to the governor and the general assembly in regard to these children." The statute then requires an annual reunion as one way to do this. The annual reunions are funded from the state appropriation.

OVCH has very little information on discharged children, and the discharge planning process appears to be minimal. Except for some of the students who graduate from OVCH's high school, the Home virtually never has information on children who leave, unless a child attends the reunion or comes back to the Home to visit someone.

The Home's Study Committee Report recommended that all discharges be planned in advance, and OVCH try to follow up with discharged pupils for at least five years.

STUDENT LIFE

As with other areas of OVCH, residential settings primarily stress control rather than development. We were told, for example, that children are not allowed to hang pictures on the walls of their rooms, including artwork they produced themselves. There are restricted hours when telephones may be used, and a staff member sits next to the telephone during the calls. Some students told us that houseparents intercept and monitor mail and sometimes do not pass it on to the intended recipients.

At the two licensed residential facilities we visited, the entire 24-hour living experience is seen as a part of the child's treatment. Thus, all group leaders responsible for cottages at one of the facilities are either licensed or license-eligible social workers. One staff member there said residential programs should not be designed to force the children to adapt to an institution, but to teach them how to function outside the institution, which is where they will live most of their lives.

Social and recreational programs

Both private facilities we visited recognize that all of a child's activities either promote or hinder the child's treatment progress. One facility includes its extensive recreational activities as an explicit part of its treatment plan. It emphasizes "win-win" games and team sports, and includes participation in programs offered by the public recreation sites nearby.

Children at this facility are encouraged to become involved in community service projects, including helping with disaster relief efforts, working in a local Easter Seals telethon, and visiting day care centers and nursing homes. A representative for the facility says this kind of active involvement has been found to improve children's sense of self-worth by showing them they can make a difference to others.

At OVCH, recreational programming is fairly minimal, with television and movies featured prominently. Little recreational use is made of off-campus sites. Very few extracurricular school activities are available to children until ninth grade.

According to the student handbook, all OVCH residents must attend a nondenominational Protestant chapel service once a week, unless they express a different religious preference. In that case, they are transported off campus to services. Sunday school attendance, according to the OVCH Study Committee Report, is "compulsory for junior campus students [elementary] and optional for main campus." OVCH officials say this is required because of tradition. They say they do not believe it violates the children's rights because no children have ever complained.

Local veterans' groups visit OVCH often and befriend some of the students. Several residents mentioned this to us as a very positive part of their OVCH experience.

HEALTH AND MEDICAL CARE

There is a clinic on the OVCH grounds, but children and staff members told us it is difficult for sick children to receive treatment there. Students, teachers, and cottage staff said that clinic personnel generally treat reported symptoms as evidence of malingering, and behave rudely if children try to report in sick outside of approved clinic hours. Students and houseparents said that it may take several weeks to get an appointment with the staff physician.

Because the clinic has limited bed capacity and there are no cottage staff on duty in the daytime, the in-school suspension room at the school is also used to house sick children.

Employees other than nurses are not trained in first aid or cardiopulmonary resuscitation (CPR). One staff member said she had been promised CPR training, but had never received any. She was planning to begin taking the course on her own. Both of the licensed facilities we visited make a conscious effort to ensure that all or most staff know basic first aid, including CPR.

The OVCH Study Committee Report includes extensive recommendations regarding policies and practices which need to be put into place in the clinic, including access to a physician and registered nurse at all times, specifying criteria used to determine if a child is ill, and training of all staff on safety procedures, emergency plans, and infection control.

As required by licensing standards, both private facilities we visited have written emergency medical plans. There is no written medical emergency plan at OVCH. At least one important health policy is not written down at all, although parents and children are required to sign a form saying they understand it and will abide by it. This policy, presented orally by field representatives to prospective residents, forbids the possession of any birth control devices on the campus, except pills prescribed for medical reason.

FRAGMENTATION OF SERVICES

The Council on Accreditation of Services for Children and Families, Inc., defines a "residential center for children" as:

> a 24-hour facility that provides care and services for children with behavioral or emotional problems who can benefit from the integrated planning for treatment that the facility makes available.

At the other facilities we visited, the organization's philosophy is that all of a child's activities are relevant to the treatment program. Therefore, they require frequent communication among all the people who work with children.

One facility requires that cottage parents talk to school teachers every day, and conducts full staffing meetings on each resident's progress at least twice a year--every two months for the first year.

The other residential facility we visited has weekly staff meetings, including houseparents, schoolteachers, and other members of the treatment team. That facility also has quarterly staffing discussions on each individual resident.

At OVCH, an integrated treatment plan is virtually nonexistent. Separate files on each child may be kept in at least seven different locations on the campus. Houseparents and teachers ordinarily do not work together on children's problems. One houseparent said houseparents are not even told why a particular child has been admitted to OVCH. School, social service, and hospital employees all reported that interdepartmental communication is haphazard or only occurs when a child is having a crisis.

A few staff members reported recent improvements in this situation, often at the initiative of a particular employee rather than because of a change in Home policy. For example, in January 1991, one teacher started sending a form to cottage houseparents and social workers noting the grades and progress of each of their students whom she taught. One houseparent expressed appreciation for this, while noting that it was still not as satisfactory as face-to-face conversation.

CHAPTER V

CONCLUSIONS AND RECOMMENDATIONS

While many staff members we met at OVCH seem dedicated and hard working, the Home lacks a clear policy direction and a professional development program for its staff. The Home accepts some children who appear to need intensive treatment, but does not provide such treatment. It accepts other children who appear to need less attention, but that attention needs to be individualized and coordinated. OVCH does not provide that attention, either.

In our opinion, OVCH has simply been neglected. In the absence of oversight and direction, the Home has drifted. There are three major reasons for this:

* OVCH is located in a relatively remote area and houses children who, by and large, have no advocates;
* Because the Home charges no fees, uses only state General Revenue Fund money, and is funded independently of any other agencies, it receives little oversight from funding sources; and
* The Home's statutes, written long ago and rarely revisited, have been interpreted to give the OVCH Board almost complete independence from regulation.

RECOMMENDATIONS

The children of OVCH have a right to an appropriate education and proper treatment so they can become productive members of their communities. The problems identified throughout this study cannot be solved by simply adopting a few more policies. There must be an explicit state-level decision--a mission statement--about what services OVCH is going to provide and to whom.

OVCH needs a complete renewal, with adequate protection for children during the transition. LOEO's recommendations to achieve this fall into three general areas:

* the Home's mission and role;
* accountability and oversight; and
* quality of services provided at OVCH.

Mission and role

LOEO finds that the Home's central problem is its lack of a clear purpose. OVCH has not been able to settle on an identifiable target population, and has not consistently provided adequate services to the children it admits.

LOEO's evaluation did not include studying all possible alternative uses of OVCH's facilities and staff. The state Interdepartmental Cluster for Services to Youth (section 121.37 of the Ohio Revised Code), which includes all the major state agencies involved with services to children and families, seems to have the necessary expertise and interest.

LOEO recommends:

- **The General Assembly direct the state Interdepartmental Cluster for Services to Youth to study the possible missions of OVCH and report to the General Assembly and the governor by January 1, 1992, on its conclusions and recommendations as to the Home's mission, governance, target population, staffing and budget needs, and funding sources.**

- **The Cluster should consult with other state departments and local agencies as needed. At a minimum, the Department of Administrative Services and the Office of Budget and Management should be involved. All local, county, and regional government units in and around Xenia should be consulted.**

- **The Home should not be redefined or restructured in such a way as to duplicate services available from private facilities. The redefinition or restructuring should assume no increase in total state appropriations for the Home.**

- **The OVCH grounds include a museum which is a valuable repository of the Home's history. Any recommendations about the disposition of the Home should explicitly address the museum and its unique collection.**

LOEO recommends:

* **The General Assembly temporarily prohibit OVCH from accepting any new children until legislation implementing the Cluster's recommendations has been adopted. This will prevent placing children who will then have to be moved again when the institution's mission is redefined.**

* **OVCH temporarily be made an operating unit of ODHS, at least until the Cluster's recommendations have been implemented. Placement in ODHS will provide for continuing oversight of the Home while it is being restructured; ODHS is the agency that oversees children's services generally, including facilities similar to OVCH. The ODHS director should appoint the Home's superintendent and should see that the Board's rules are formally adopted and published in the Ohio Administrative Code.**

Accountability and oversight

The isolation of OVCH from current trends and state policies in education and child welfare has been brought about in part by lack of oversight by state government, parents, and others. It is vital to maintain continuous scrutiny of OVCH's operations and policies as long as it is a state-operated facility, especially one that cares for children.

LOEO recommends:

* **Persons or agencies who have children in OVCH, both now and as the facility is redefined, should bear the cost of the children's care. We suggest that parents or agencies become responsible for 25 percent of the cost of placement beginning on October 1, 1991; for 50 percent beginning January 1, 1992; for 75 percent beginning April 1, 1992; and for 100 percent beginning July 1, 1992.**

We believe this will improve accountability by heightening the interest of children's custodians in what services are being provided. We expect this may also reduce the number of children placed unnecessarily in residential care at the Home. An official of the Ohio Department of Mental Health told us that since local mental health

boards must now pay to place children in state psychiatric hospitals, "they are starting to question the need for this kind of placement. They've become far more creative in looking for alternatives."

LOEO recommends:

- **The General Assembly require OVCH to begin immediately to determine how it can maximize payments from federal and third-party sources. These payments will not only help to defray the cost of the facility, but will also provide additional scrutiny for OVCH programming.**

- **The General Assembly require the agency administering the facility to conduct formal studies designed to ensure that the Home continues to fulfill a specific role in Ohio government, that it operates effectively and efficiently, and that its functions do not duplicate those available from the private sector. Studies should occur one year after the restructuring is implemented; again two and four years later; and after that, every eight years.**

Quality of services

At OVCH we found that some services are lacking, all services are fragmented, and control is substituted for treatment. This should not continue, no matter what the institution's future role is. At least a minimum quality of educational and other services should be guaranteed as soon as possible at OVCH.

LOEO recommends:

- **The General Assembly require OVCH to obtain an ODHS license as a children's residential facility by January 1, 1992.**

- **The General Assembly require OVCH to have a special education plan, as all local school districts must, by January 1, 1992. This would ensure ODE scrutiny of OVCH's compliance with the Home's existing statutory mandate to provide special education programs for its residents.**

Because of the nature of OVCH's population, every child entering the Home should have a current multifactored evaluation. Any child found to need special education services should have an IEP prepared. Parents should be involved in all aspects of the children's education programs.

The General Assembly should consider whether the school children might be better served if OVCH's school program were operated by Xenia's city school system.

APPENDIX

OVCH RESPONSE AND

LOEO NOTES

The Legislative Committee on Education Oversight allows agencies affected by LOEO studies to have comments of reasonable length included in the final report. LOEO staff may add notes to an agency response if the response contains significant incorrect or other potentially misleading statements.

Nothing in the following OVCH response contradicts any of LOEO's findings or conclusions. A few examples of possible misunderstandings follow.

OVCH mission

LOEO found OVCH "unclear about what it is to do, to whom, and why." Two points should be noted about the mission statement on page 1 of OVCH's response. First, the statement is not particularly clear; that is, it does not provide guidance about what kind of staff, programming, or other resources OVCH needs to fulfill the mission, or about specifically what sort of children are likely to benefit from institutionalization at OVCH.

Second, OVCH has not in the past chosen to recruit the type of staff or develop programs that would enable it to be licensed to carry out any mission in the child welfare system. Even a clear mission statement is not meaningful if it is not implemented by qualified people operating within a coherent programmatic framework.

Fragmented services

OVCH says, on page 5 of its response, that "five interdisciplinary team meetings are held weekly. . . ." These are meetings of two committees: The one which decides whether to discharge a child who is not adjusting to the institution, and the one which decides whether to reward a child who is. They are not meetings to plan treatment, education, or reunification. OVCH's residential, social services, and teaching staff still do not meet for any of those purposes; the OVCH response does not say any such meetings are planned.

Control instead of treatment

Page 5 of the OVCH response says:

> It is our belief that campus-wide developmental programming initiates change through positive reinforcement, a preferred option over mere control.

OVCH says, however, only that this is their belief, not that it is their actual practice. LOEO and OVCH's own study committee found that control is the preferred method of seeking change in actual practice at OVCH.

Isolation

OVCH includes a letter from the Greene County education agency, apparently in response to our statement that OVCH's teachers are not certified or specifically trained to teach children with the handicaps documented in the children's files. The Greene County list of activities confirms, rather than refutes, our statement--it includes inservice training programs called Critical Thinking Skills, Sports Clinic, Administrators' Workshop, and SB 140 Update, for example, but none related to teaching children with handicaps.

On page 7, OVCH claims to "have done as much as we can" to attract federal and other money. OVCH officials are apparently unaware that, by becoming licensed, the Home could be eligible for substantial additional federal funds, such as those for children in substitute care.

The U.S. News and World Report article which OVCH asked us to append also reinforces the point that OVCH is out of touch with current child welfare programming. The article points out that many experts see a place in the child welfare system for facilities larger and perhaps more permanent than foster homes. However, as the article notes, such facilities must provide services we did not find at OVCH:

> Some of the group facilities are truly as awful as the orphanages of the past. . . . Residential facilities that have opened in the past decade have had some success by separating children by age and need, and by providing a range of services--from intensive therapy for emotionally disturbed kids to short-term placement for children who will be returned to their natural family or placed for adoption.

OVCH provides none of these services. A related article, "The Return of the Orphanage," by Penelope Lemov, in the May 1991 issue of Governing, says in part:

> Even if orphanages are a necessary part of the solution, there is good reason to be wary of them. . . . Such a facility, with shifts of staff rather than surrogate parents, would then be an institution in the worst sense of the word and, [a Missouri administrator] continues, "State institutions don't go away, they just get lousy. Once that orphanage is built, I guarantee I'll fill it, and it will never go away."
>
> There is also concern that policy makers could use the concept of orphanage in a negative sense by building huge institutions and warehousing kids.

Facilities that are licensed and regulated, as LOEO proposes for OVCH, are more likely to fulfill a useful function in the child welfare system. The OVCH response does not address this point, and the U.S. News and World Report article is not germane to it.

Veterans' status

OVCH says on page 7 that free use of the Home is a benefit to veterans. The General Assembly may wish to exempt from the fee requirement any veterans who have custody of children and choose to institutionalize them at OVCH.

Ohio Veterans' Children's Home

690 Home Avenue Xenia, Ohio 45385 513-372-6908

BOARD OF TRUSTEES
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S.L. STEPHAN
Interim Superintendent

May 20, 1991

Mr. Paul Marshall, Director
Legislative Office of Education Oversight
Vern Riffe Center
77 South High Street, Concourse
Columbus, OH 43266

Dear Mr. Marshall:

Please find enclosed the Ohio Veterans' Children's Home response to the Legislative Office of Education Oversight's Draft Report of May 1, 1991. As you know, we faxed our response on Friday, May 17, so that you could receive the response as soon as possible.

I want to express my sincere thanks to you and your staff for the extension we received in responding to your draft report. Please feel free to call me if you have any questions or if I can be of any assistance.

Sincerely,

S. L. Stephan
Col USMC (Ret)
Interim Superintendent

lmp

The Ohio Veterans' Children's Home is an Equal Opportunity Employer
Produced by the OVCH Graphic Arts class

THE OHIO VETERANS' CHILDREN'S HOME

May 16, 1991

A POSITION PAPER - RE: May 1, 1991, Ohio Veterans' Children's Home (OVCH) Draft Report by the Legislative Office of Education Oversight

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The following comments are submitted in accordance with Legislative Office of Education Oversight (LOEO) letter dated May 1, 1991, draft report attached:

We appreciate the Committee's time spent in providing us with their insights and comprehensive evaluation of our Home. We have a clear understanding of why the Committee had addressed the issues in their report. We now wish to direct our response to those issues.

Answering the call made by President Abraham Lincoln in his second Inaugural address "to provide for those who had suffered," the State of Ohio established the Ohio Soldiers' and Sailors' Orphans' Home in 1869 to provide for destitute children of Civil War veterans.

This Home has been in continuous operation since its founding. Through the years it provided a complete home environment for the children of veterans including education, health care, and religious and social needs. While changes have occurred, the goal of providing for needy children has stayed the same.

In 1978 the name of the Home was changed from Ohio Soldiers' and Sailors' Orphans' Home to Ohio Veterans' Children's Home for more correct identification. Also, while preference still is given to children of veterans, admission policies were broadened to include other children who could benefit from the Home's care.

The 1980's were a time of change for the Home. There were four superintendents; three unions were voted to represent employees; staffing patterns changed; and youth admitted reflected the multiple problems of today's society.

Other changes have occurred in recent years. Because children have been admitted for much shorter stays, their attitude toward the Home differs from that of previous youth who stayed for a number of years and considered the facility their home.

The mission of the OVCH is to provide a multi-faceted program of education, personal growth and development for children who are residents of Ohio and whose parents are unable or incapable of providing adequate care, education and support. In recent years, there has been a renewed interest and understanding

among child care and education professionals that a "new orphan" exists. The parents are alive but are so disengaged from child-rearing or are so overwhelmed that the children are abandoned. (Please see the attached copy of the article The New Orphanages, by Linda L. Creighton, U. S. News and World Report, October 8, 1990.)

OVCH serves:

Children who have average, near average or above average abilities but who are not functioning academically because of truancy, lack of support, etc.

KATHY: Kathy was referred to OVCH by her probation officer. At 15, she was demonstrating unruly behavior and was frequently truant from school.

Kathy lived with her mother and her mother's 23 year old "live in" boyfriend. Kathy alleged that she was sexually abused by this man, however, subsequent investigations failed to substantiate these charges.

In school, Kathy was failing 9th grade due to truancy and a lack of motivation. She was sexually promiscuous with her 19 year old boyfriend and was considered "at risk" by her school guidance counselor.

During her placement at the Home, Kathy learned to feel good about herself and her abilities. She attended Woodrow Wilson School for three years and received enough credits to get back on track academically.

During her visits home, Kathy grew to respect her mother and subsequently decided to return home with her mother to start her senior year.

Children who have mild to moderate emotional disturbances that are not problematic to the group and can be positively influenced by the Home's supportive services.

DICK: Dick was ten years old when he entered the Home. His admission was facilitated through the efforts of his parents who were attempting to find an appropriate long-term placement. His mother refers to Dick as a "punishment from God" due to an earlier abortion she had.

Prior to moving to OVCH, Dick had been in six previous psychiatric hospital or residential treatment settings (his first placement was at age four).

Dick's placement within his family system has always been dysfunctional. As his involvement with psychiatrists and psychologists grew, so did his list of diagnoses. Immediately before entering OVCH, Dick was a patient at a state mental health hospital and was on three different psychotropic medications.

During his placement at the Home, Dick has been gradually weaned off his medication. Dick is doing well academically and behaviorally. He recently was granted "Honor Citizen" status which recognizes his outstanding performance. Dick has formed a special bond with a member of our social service staff and spends a lot of time talking the nurses into giving him cookies. To see Dick walking across campus, it is hard to visualize this young man "wasting away" in a state mental hospital.

Children who come from dysfunctional families due to abuse, neglect, co-dependency issues or parent-to-child conflicts.

CHER: Cher came to OVCH in the Fall of 1989. Prior to coming to OVCH, she had lived with her mother and then her father, had three foster home placements, and a psychiatric hospitalization. Cher came from a dysfunctional family. She allegedly was sexually abused by a male relative from the ages of 5 through 11. Her parents were divorced, and her mother's boyfriend drank heavily and was physically abusive to the mother.

Cher's behavior prior to her placement at OVCH was categorized as anti-social by the psychiatrist at the hospital. She showed signs of a paranoid personality disorder, displayed poor judgement and weak impulse control. Testing indicated a likelihood that Cher would attempt suicide. Despite a high average IQ, Cher made below average grades. Her prognosis at the time of hospitalization was poor. She had been involved with juvenile court for charges of theft, assault, and truancy. Cher was accused of setting a fire in a girls restroom in school. In requesting placement for Cher, a children services' caseworker wrote, "Cher is a child who follows conventional rules much better if they're not linked with her relationship with her role provider."

Although Cher did not want to come to OVCH, and continued to voice her objections after placement, she settled into the routine and responded positively to the structure. She did test the limits, but her grades improved. Over time, the relationship with her mother was re-established and behavior strengthened. Cher learned to take responsibility for her behavior and to relate to peers without fighting. During her senior year, Cher became a positive leader, taking the initiative to plan class activities and being voted homecoming queen. She performed well in her vocational class in cosmetology. This class led to her developing an interest in nursing. Cher will attend a hospital affiliated nursing school next fall to become a registered nurse. She is goal oriented and headed toward being a successful citizen.

Children who have difficulty bonding emotionally in a traditional family or foster family environment.

RICHARD: Richard was 12 years old when he and his older brother were admitted to the Home. Children services became involved due to abuse/neglect issues and described Richard's home as deplorable.

Prior to OVCH, Richard was in approximately ten different relative and foster care placements in several different cities. He was experiencing behavioral problems and was behind academically. Richard was not considered an "appropriate" candidate for foster care and was in need of long-term stable placement. He was described as angry and potentially explosive.

Richard's overall adjustment was good. He exceeded in sports, lettering in football, and in Jr. ROTC as Battalion Commander. Richard graduated and attended college before entering the Marine Corps. Richard is stationed in California and recently completed a tour of duty in Saudi Arabia as a part of "Dessert Storm."

Children for whom reunification is no longer an option, who are in need of long term out-of-home placement, and are strongly motivated to accept and succeed in a residential placement.

FRANK: Frank was admitted to OVCH at the age of 12. Placement at the Home was facilitated through the efforts of Logan County Juvenile Court and Frank's mother.

Frank was the oldest of three boys. His family was chronically involved with children services due to issues of neglect, physical abuse, and poverty. Before coming to OVCH, Frank had lived in eight different locations and along with his family had been evicted from each one. Frank came to the attention of the juvenile authorities for stealing a bicycle and criminal damaging (i.e., breaking a window).

In school, Frank was placed in classes for severe behaviorally handicapped students, due to his low academic functioning and disruptive behavior. He was impulsive, angry, lonely, and depressed with almost no self-esteem. He saw himself as worthless and rejected.

During his seven year stay at the Home, Frank experienced many successes in school, sports, and military. He played several sports throughout his high school years and lettered in football and basketball. He participated in Jr. ROTC and was selected as Battalion Commander his senior year. Frank studied business in school and graduated. He received several grants and scholarships to further his education.

Frank formed many lasting relationships at OVCH with teachers, coaches, houseparents, and others. He was given the opportunity to develop at his own pace in a safe, secure environment.

Frank attended Rio Grande College and is presently in the Army, stationed in Hawaii.

We recognize and wholeheartedly embrace the team approach in working with the Home's children. At least five interdisciplinary team meetings are held weekly by professionals who address the students' admission, adjustment, conduct and emotional needs. It is our belief that campus-wide developmental programming initiates change through positive reinforcement, a preferred option over mere control. Also, professional staff members must maintain state licensure/certification in their respective areas and meet extensive continuing education requirements that keep them abreast of current thinking and philosophy. We recognize that safe-guarding these standards is essential in successfully and continuously meeting our mission.

It is correct that approximately 65% of our students <u>are</u> placed through voluntary agreements with their parents of legal guardians; however, the overwhelming majority were involved with a court or social service agency in their home county prior to placement with us.

In keeping with our mission, the academic education of our students has been a priority throughout our 122 year history. In 1989, our schools assumed a vastly improved direction under the guidance of a new and restructured education administration. Since that time, our staff has steadily worked to comply with all of the Ohio Department of Education (ODE) requirements. During the February 1991 site visit, ODE found OVCH out of compliance in 13 areas compared to 24 in 1986. This is a significant improvement considering those results came in the past two years.

Through consultation with our evaluators, Reid Baker and James Hopper of the ODE, we have been encouraged to apply for a special purpose or experimental charter. When the ODE approves this request, five of the thirteen areas of non-compliance will be resolved. Of the eight remaining concerns those regarding courses of study, inservice records, fire inspection and drills, and our guidance plan have already been addressed and are in the process of review for compliance. The remaining four which include educational program evaluation, policies from our board of trustees, staff assignments, and correcting health inspection deficiencies will require more time. A goal of December 1991 is set for 100% compliance.

Regarding staff certification, the one health class and one math class will be rescheduled to be taught by properly certified staff. Spanish for grades 4-6 will not be scheduled in '91-'92. This leaves one staff member out of certification. She is instructing on a non-tax certificate, but she will complete coursework for appropriate public school certification by September, 1992, or face dismissal.

Education administrative staff certification also requires clarification. The Education Administrator has certification in special education administration, elementary administration, and as an assistant superintendent. The principal holds certification in K-8 administration and K-12 supervision. With the completion of four courses, he will obtain K-12 administrative certification. The assistant principal holds certificates as a superintendent, local superintendent, 7-12 principal, and 7-12 supervisor. The Teaching Supervisor 2 (Chapter I supervisor) has been grandfathered into her supervisory position.

She holds a masters degree and with completion of four courses will obtain a state supervisory certificate. Our dedicated education staff has a combined total of 556 years of professional experience. A renewed emphasis is being placed on volunteer community based support such as art therapists from Wilmington College, tutoring from Cedarville College, student teachers from Urbana College, Central State University, Wright State University, and University of Dayton.

We only recently learned that three of our vocational programs were disapproved by ODE. Their disapproval was based on a misunderstanding of how the objectives are incorporated into the courses of study. We anticipate approval of these programs for the 91-92 school year.

Approximately 86% of our students come to OVCH with academic difficulties and are on an average, 2-3 years behind their peers. Our educational staff utilizes individual instruction and orientation via a small staff-to-pupil ratio; Chapter 1 reading and math assistance; a vocational reading program; tutoring and summer school. In addition, identified students receive diagnostic educational testing from a licensed clinical psychologist and are evaluated by a board certified child psychiatrist.

The LOEO report correctly places emphasis on the issues of staff inservice and staff teaching outside their respective areas of certification. The attached letter from the Superintendent of the Greene County Office of Education attests to staff inservice having been an ongoing and instrumental part of our educational program.

OVCH provides a unique setting that well serves the needs of children who are scheduled for family reunification, as well as those for whom reunification is not appropriate. Thus, it may appear that we are not in compliance with the mandates of SB 89. We actively seek reunification where appropriate, and we provide a stable, consistent environment for those children identified as needing long term substitute care.

We do not categorize OVCH as a treatment facility. Rather, we offer a behavioral therapeutic milieu augmented by specialized support services tailored to selected children. Twenty-six professionals with a combined total of 380 years of experience provide supportive services. This staff includes social workers, medical personnel, psychological and psychiatric staff, and vocational and academic counselors. Moreover, we anticipate the addition of two clinical staff in July to better deal with the increasingly complex issues of chemical dependency and mental health. This will supplement the community resources we now use which includes grant funded group therapy for "at risk" children facilitated by the Bergamo Center. Issues such as separation anxiety, anger management, self-esteem, and co-dependency are being addressed in these group sessions. We are in the formative stages of a similar program with Central State University's Psychology Department.

We strongly disagree with the recommendation that OVCH be prohibited from accepting new children during the time of study. The Home continues to receive state-wide requests for placement and denying children such placement is a grave disservice to Ohio's troubled youth.

It is unrealistic to assume parents could support even 25% of a child's care given their predominantly limited financial status. Such a suggestion also negates our historical mission wherein Ohio agrees to provide its veterans with cost-free services that include suitable education and care for their children if needed.

In response to the recommendation that OVCH begin to maximize payments from Federal and third-party sources, this has been an on-going effort for some time. Examples include the School Breakfast/Lunch Reimbursement Program, Tuition Reimbursement Program, Carl D. Perkins Grant, use of individual medical insurance and the use of donated funds from veterans' organizations and grants. Frankly, we have done as much as we can without the assistance of a development type office that would solicit donor funding on a full time basis.

In regards to the question of utilizing Xenia City Schools, we trust the General Assembly, as they consider the school placement of our children, will consider the multiple education and attendance failures which have typically brought them to OVCH. To this end, we would welcome discussion with any school officials pertaining to the education of our class of youth.

It should be noted that on April 27, 1991, Lt. Governor DeWine initiated a study of OVCH mission and circumstances that is ongoing. Therefore, it is premature to place the Home under control of ODHS even temporarily and inappropriate for that office to appoint the Home's next Superintendent.

As we reflect upon our rich heritage of providing quality care and education to the children of veterans and the "<u>new orphans</u>" of Ohio, we heartily endorse the development of a comprehensive plan to accomplish both short-term and long range goals and objectives.

Respectfully,

S. L. Stephan
Col USMC (Ret)
Interim Superintendent

lmp

ATTACHMENT: 1. Letter from Greene County Office of Education, May 8, 1991
2. U. S. News and World Report, October 8, 1990 (Article)

GREENE COUNTY OFFICE OF EDUCATION

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May 8, 1991

To Whom It May Concern:

RE: Contracted Services with O.V.C.H.

The Greene County Board of Education has been contracting services with O.V.C.H. since the 1988-89 school year.

Listed below are some of the services provided to staff members and students at O.V.C.H.

O.V.C.H. staff members are involved in the development of courses of study on a five-year cycle. The staff of the Greene County Office of Education coordinates the development or revision of all courses of study for all Greene County Schools and O.V.C.H. is represented on all committees. This year we just completed Art K-12, Music K-12, and Science K-12. Textbooks are also studied and evaluated during the same school year and adoptions are made by the County Office and the local school districts. The O.V.C.H. committee members also receive textbook samples and hear the presentations by textbook representatives.

Another major service provided O.V.C.H. staff members involves staff development. We have coordinated several inservice programs just for O.V.C.H. staff including Critical Thinking Skills, Cooperative Learning, and one being planned right now is Conflict Management.

Other inservice programs that O.V.C.H. staff members have been involved in include the following: TESA, Project Way, Drug Intervention, Clean Greene, Sports Clinic, SB140 Update, Administrators' Workshop, and others.

ATTACHMENT 1 (2 pages)

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We also coordinate the Driver Education Program for the students at O.V.C.H. and all staff members have access to the Greene County Film Library.

The teachers are also involved in the Teacher Recognition Event held each year in May.

Our staff meets with the O.V.C.H. administration on several occasions each year to meet the inservice needs of the staff.

Sincerely,

William S. Wright
Assistant Superintendent
Greene County Schools

WSW/ch

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May 6, 1991

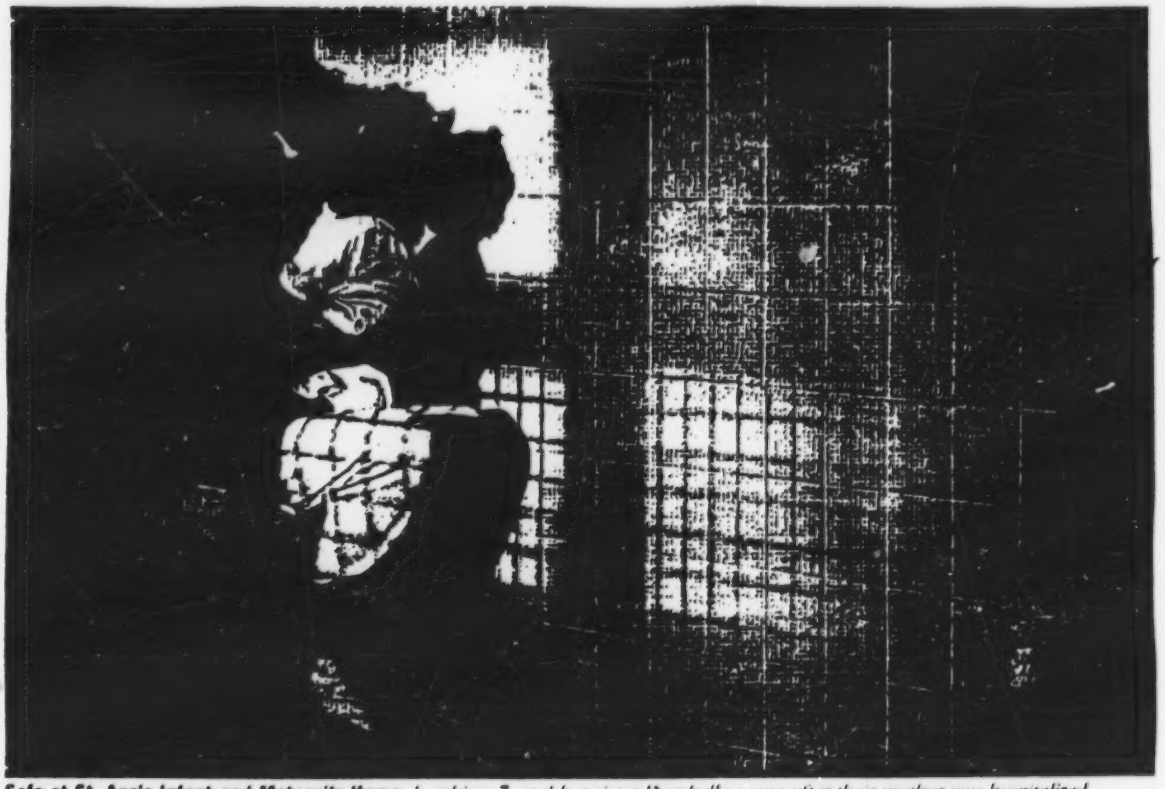
TO: Col. Strayer

FROM: H. Gregory Kelly

RE: Requested Statistical Information

FISCAL YEAR	POPULATION AS OF 6/30	TOTAL # SERVED
83	196	286
84	201	315
85	201	318
86	164	346
87	206	364
88	230	402
89	204	411
90	219	405
91	210*	410
92	210*	375
93	210*	360

* estimated (based on 18 open cottages with a maximum capacity of 200-220 students).



Safe at St. Ann's Infant and Maternity Home. *Larshiya, 7, and her sister Darchelle came after their mother was hospitalized*

The new orphanages

The rise of 'parentless families' in U.S. cities and the crisis in foster care have led to a return of orphanages. The best are very special places

Long after dark, strangers arrive carrying a 2-year-old. Her arms and legs are encrusted with dirt; her grimy hands clutch a half-empty bottle of milk. The women who have brought her fill out forms silently, writing "Oriana" on the line requesting a name, and hand them to the night receptionist. Within a few moments, the transaction is complete. A door opens and a nun rustles across the room. Bending to touch the child's head, she murmurs, "Are you hungry?" And as the tiny girl reaches up to be held, she becomes one of the neglected, abused or abandoned children who have been pulled back from the edge of danger. Tonight she is safe at St. Ann's Infant and Maternity Home.

For the last 130 years, the orphanage in Hyattsville, Md., has quietly stayed its course while American trends in caring for abused, abandoned or otherwise suffering children swerved from one solution to another. "A good institution is better than a bad home," says Sister Josephine Murphy, 61, director of this refuge for 51 threatened children. St. Ann's now is on the cusp of another swing in social policy: The comeback of orphanages.

STORY AND PHOTOGRAPHY BY LINDA L. CREIGHTON

Not long ago, orphanages were almost extinct because of their reputation as hellholes run by abusive administrators. There was some truth to that Dickensian image. In the 1970s, accounts of atrocities against children in bad facilities prompted a slew of lawsuits that resulted in the closing of many of the larger group residential homes, both private and public.

But in the 1990s, there are new horror stories. They are about children who *need* orphanages, in the view of a growing number of advocates, partly because the child-protection system in the country has collapsed. Reports of child abuse in 1989 numbered a staggering 2.4 million cases; there are no estimates on how many kids suffer anonymously. Last spring, drug czar William Bennett became the highest-ranking public official to urge a full-scale return to orphanages. "We may just have to find some way for children to get out of the environment they are in—to go to orphanages," he

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PATRICIA

Six-year-old Patricia has PCP and cocaine to blame for her problems. Her parents, Mark, 28, and Diane, 27, left her when she was 4 in the care of her grandmother while they went on a drug binge. The grandmother reported the situation, and Patricia was sent to St. Ann's. Her parents made the 3-hour trip twice weekly from Baltimore to visit and spoke often of the room they would decorate for Patricia's return. They knew, though, that St. Ann's was a good refuge. "She's around different people, learning the right way to do things," said Diane. But the room saved for Patricia may never be hers. Recently her parents were found to be using drugs again. Patricia was placed with an aunt and is doing well.

argued at a Florida conference. "There are communities in America where children are not being raised at all."

Loving the abandoned. These children are America's new orphans. Their parents are alive but so disengaged from child rearing or have such overwhelming problems that the kids are abandoned. In the worst places, single-parent families have been replaced by "parentless families," says Senator Daniel P. Moynihan of New York. Many of these children are getting help in institutions that not too long ago would have been called orphanages. For the squeamish, though, the name has been changed. Now, they are called "group homes" or "congregate care" institutions. There are now more than 1,000 such homes nationwide, each typically caring for eight to 125 children, sometimes for long periods. Dozens of cities have "boarder baby" wards, the functional equivalent of orphanages for infants with crack addiction and AIDS.

Some of the group facilities are truly as awful as the orphanages of the past. But many have adopted progressive and personalized programs that are charting new courses. It is those facilities that have convinced some advocates that the modern version of orphanages can help the children most in need. That has not allayed the fears of many child-care experts, who argue that orphanages are a historic failure and that resources used by group-care facilities would be better spent upgrading foster care. The latest battleground for this fight is New York City, where Clara "Mother" Hale, who has taken care of more than 800 crack babies, last week ripped city officials for refusing to place children in her group home. The city claims foster care is better. But that argument fails to appreciate the good work of Hale House. And places like St. Ann's:

The Maryland group home is in an unassuming brick building, has a 150-person staff, in addition to nine nuns, and creates a home for 36 infants and 15 children between the ages of 4 and 11. Its Civil War-era mission of caring for "unprotected females during their confinement" is still alive: St. Ann's also houses 24 unmarried, pregnant women and eight new mothers. It's the children, though, who make the most striking impression.

A small girl, hair neatly braided, marches in squeaking sneakers toward a door marked "St. Louise." Swinging the heavy door open, 7-year-old Larshiya walks in to the cries of 36 babies in the infants' wing of St. Ann's. She is there to see "her baby"—her 11-month-old sister Darchelle.

This is the first time the 7-year-old has not had the full responsibility of parenting. When their mother was hospitalized for mental problems, the children were left alone in an apartment in Washington, D.C. Larshiya and Darchelle were brought to St. Ann's. Striding into a room where the afternoon sun hakes four cribs, Larshiya begins to coo. "Hello, my baby," and the pudgy cheeks of her sister ride up on a huge smile. Larshiya can barely reach over the crib rails but in a practiced move lifts Darchelle out. Looking around the room at the other toddlers, now on their feet and staring expectantly, Larshiya laughs and says, "Ain't it funny how babies act like they know what you're saying?"

Some of these babies were stuffed into trash cans and left for dead, some beaten so se-

"Thank you, Lord, for milk and bread." *St. Ann's staff members try to make the institution seem like a home*

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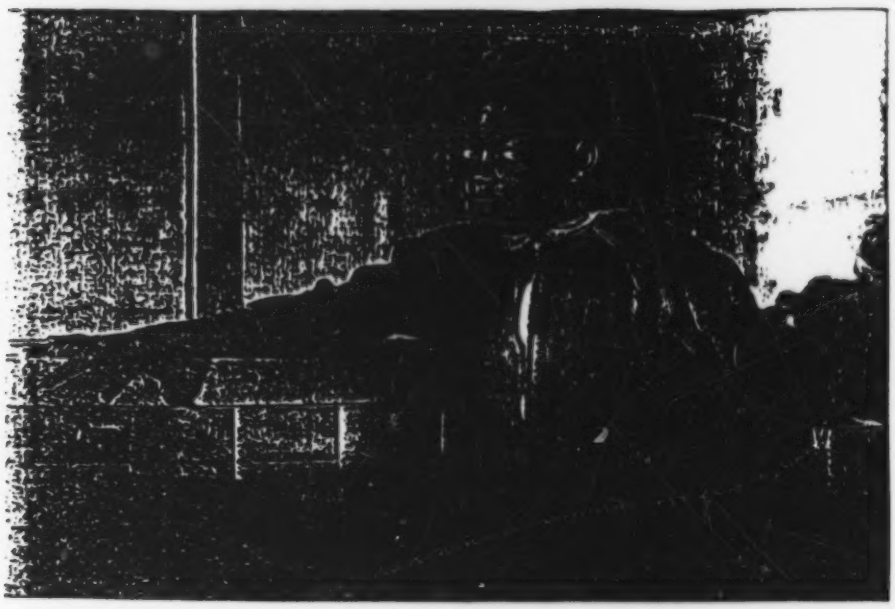


MICHAEL

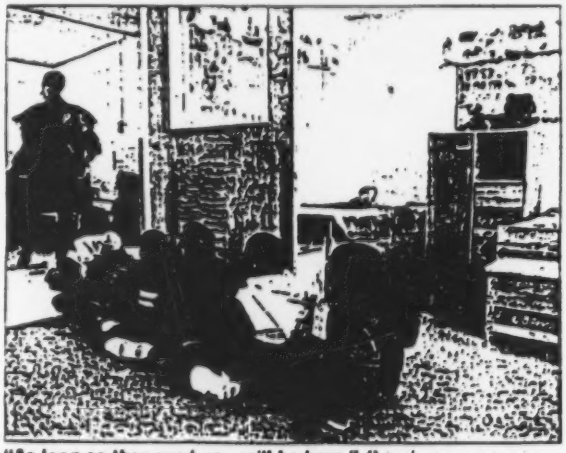
The "ifs" in Michael's life are too much for any 7-year-old. If his father had a higher salary, if his mother drove instead of taking the bus to the doctor's, if his parents understood the welfare system better, perhaps Michael wouldn't have suffered so much from a case of ringworm. But, untended, it festered into an oozing head sore that authorities said showed he was neglected. Michael went to St. Ann's. After five months, he returned home, but problems remain. His parents' Baltimore row house is on a street choked with drug dealers. The family has no money to move. So, Michael sings his version of the blues: "Don't like it here, don't like it there, ain't going back to where I came from."

verely that they spent weeks in hospitals before coming to St. Ann's. Others were thrown out windows, raped or burned. Not many of them were lucky enough to have even a 7-year-old to love them. Larshiya carries her little charge down the hall to a door marked "Guardian Angel." She rests her forehead against Darchelle's and says, "See, I live right here."

"Nothing will happen to them." The name of the wing where Larshiya lives is a promise made to its children. The way of life here, with everything given and nothing taken away, is the antithesis of what they have known. "I try to let them know they're safe here, and nothing will happen to them," says Joan Wynn, a giver of priceless care for 16 years. Echoes Mae Ferguson, a 50-year-old mother of five: "We can't take the place of family, but we're everything they've got right now."

While the girls are playing, a fight breaks out between two youngsters, Marcel and Michael, down the hall. Joan runs to untangle them, and Marcel is told to "take time out." For children who have been locked in closets for days, or starved and beaten, simply being told to sit quietly apart from other children is amazingly effective. Corporal punishment is strictly forbidden. "They've been punished enough," says Ona Worthy, another worker.

All of those old enough are in educational programs, most in local public schools, some in schools that give special attention to emotional problems, and the younger ones in public day care in the building. "It's rare for the kids to have had consistent schooling," says Sister Maureen Bettman, who tutors children too far behind to attend regular classes.



"As long as they need us, we'll be here." *Priceless care is given by staff members whose average salary is about $12,000*

Larshiya must now return her sister to the baby unit and reluctantly carries her back, kissing her several times and patting the other babies. In response to Darchelle's cries, she soothes, "I'll be back tomorrow. Promise." And then she walks back to Guardian Angel where she can be a little girl, too.

Dinner time, and small steaming plates of greens and roast beef are placed in the center of each table of five children. The noise level is deafening, children chattering and workers calling back and forth to each other from kitchen to dining room. There are the usual admonishments. "Tamarr, I want you to eat your potatoes tonight." Small heads carved with hairline scars and ringworm marks bow to say grace, and the childish chants drift out through the windows:

"Thank you, Lord, for milk and bread/ And all the things so good./ Thank you, Lord, for those who help/ To go and cook our food. Amen."

After dessert, Activities Director Mary Bader arrives. The 29-year-old hits the halls like a traveling vaudeville show. "Most of these kids come from nothing, and they've seen nothing," says Mary. She tells of a 7-year-old who had never been out of her house and could not envision mountains. So Mary took her to one. "During the whole drive up, she kept saying, 'Where's this mountain?' All I can see is trees.' At the top we got out and walked to a clearing; and she looked around and then up at me and said, 'This is what a mountain is.' " Mary worries a bit that the good life here is unrealistic: "A lot will never have anything like this again."

Faithful volunteers are an important part of the children's lives here. *Washington*

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JAMES

If there were medals for survivors, James would be on the short list. He was given away by his mother to an uncle who abused him severely. Then he was given to the child-protection services. After a stint in a child psychiatric ward, James ended up at St. Ann's when he was 5. He spent the next three years healing physical and emotional scars, attending a special therapeutic school and waiting for the right family. James understands that permanent adoption would mean no more rejections. And when he thinks of that, a slow smile reflects his dreams: "A mother and father in a pretty home with flowers on the dresser and my bed made up. And every night I would say, 'I'll see you in the morning.' Forever."

Post columnist Mary McGrory, who has served on St. Ann's board, has been coming here every Thursday night for many years, digging bags of candy out of her elegant purse and holding an annual Christmas party where prominent writers play Santa. Male volunteers provide piggyback rides and roughhousing. Louis Zinzi, a father of grown children, has visited every night for eight years. Loading the kids into the white St. Ann's van each Sunday morning, he treats Guardian Angels to brunch at an elegant restaurant. He and Sister Maureen preside over raucous trips to the buffet, shouting over the din, "Hey, if they never go out, they'll never learn how to go out, right?"

In the evening, while the boys zoom toy trucks up and down the tiled hall, the girls gather on the floor of their room for "story time." Not the usual stories, but ones about their fears and dreams. Gathering around Veronica Greenhow, one of the workers, one by one they express secret longings. "I wish I would be back with my mother and we would have 1,000 bedrooms in a house," says Larshiya. Jessica, 5, begins a long story about how her mother and father live in a large house and take her to the zoo regularly. She is gently asked to tell a true story or describe a wish, not to make things up. Jessica does not know her father, and her mother, released from prison, is trying hard to find a place to live so she can reclaim her six children.

St. Ann's staffers are ambivalent about some of those reunions. Two 25-year-old social workers, Kathleen Tucker and Karen Arnsberger, together with their supervisor, Lisa Boyle, are strong advocates for their charges. But they have no legal role in making those decisions. The D.C. Department of Human Services and the Maryland Department of Social Services, which both place children at St. Ann's, may reclaim the children at any time, as may parents who satisfy legal requirements. "To see a child leave when you know they shouldn't is really heartbreaking," says Kathleen.

It is at night that the sadness of St. Ann's is most tangible. Although the boys start a pillow fight and the girls in their

THE CASE FOR ORPHANAGES

Challenging the myths

None too few child-care advocates are appalled at the prospect of orphanages making a comeback. Brian Wilcox of the American Psychological Association argues: "Institutions were not closed down because they were good. I think it's inappropriate to be talking about an alternative this extreme when we haven't tried prevention or crisis intervention for families at risk." Still, the case for residential facilities has become increasingly powerful. Here is how advocates respond to critics:

■ **Children belong in families.** Of course, but there are not enough families to go around in this age of drugs, divorce and poverty. There are now 500,000 children in the United States—a number that will rise to 840,000 in five years—who need out-of-home placement now, and there are only 125,000 foster homes. Part of the problem is that the average reimbursement for foster families in the U.S. has dropped to below $10 a day per child. Even when children get foster placements, the system often makes matters worse. Many of the children bear physical or mental scars so severe that average foster parents aren't able to give them adequate care. With

Bennett at St. Ann's. *The drug official promoting the idea that*

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DIANE

Diane spent the sixth Christmas of her life homeless. She begged for food with her mother, Arlene, and slept in abandoned cars in the bitter chill. Reported to authorities, she ended up safe and nourished at St. Ann's. Phone calls were their only contact for a while. "Mommy, when are you coming to get me? Do you have things together now?" she would ask as tears rolled off her cheeks. At bedtime, workers at St. Ann's held her as she cried herself to sleep. But Arlene did beat her addiction and got her life together and called Diane: Mom was coming to get her. One recent day in her new neighborhood, Diane explained to a playmate that St. Ann's is "a very nice place where I lived for a while."

pajamas race giggling up and down the hall, there is a reluctance beyond the normal childhood delay in going to bed. The ritual of prayers and tuck-ins for such small children seems diminished somehow without parents, despite all the love provided by the staff. Says Timi Gray, floor supervisor, "They lack nothing here—except being at home with their parents."

Without exception, they fear the dark, which forces them to confront their worst memories. The women on the night shift are all too familiar with their nightmares, writing in a small logbook how each child has slept during the long night.

For every problem in the outside world, there are children here who bear witness. They have learned to trust no one, learned to be disappointed by everything. Time at St. Ann's gives some the ability to trust again. "Rather than take kids to an institution, it would be nicer if some woman in a home would put on a robe and answer a midnight plea for children," says Evelyn Andrews, chief of Child and Family Services of Washington, D.C. But there are not enough women or families to open their doors to desperate children. There is Sister Josephine in her slightly rumpled nun's habit, quietly appearing in the middle of the night in the small lobby of St. Ann's. "As long as they need us," she says, "we'll be here." ■

is the highest-ranking
nmages can be very useful

child-welfare workers often overburdened, handling up to 200 cases each, there is frequently no follow-up—and too many repeat placements that keep kids shuttling from one packed foster home to another. Orphanages can provide a more stable environment.

■ **Institutions hurt development.** Many psychology texts, relying on 40-year-old studies by Anna Freud, still take as a given that children raised in group care suffer developmental problems. But most of the bad institutions were closed in the second half of this century, and there is not a large body of information about children's welfare in small-group care. Although he says he is reluctant to turn to orphanages as a solution, New Orleans pediatrician Dr. George Sterne argues that, "Even with infants, if there is a continuity of staff and the staff relates to the infants on an individual basis, that's not necessarily going to be a harmful situation for the child."

■ **Historically, orphanages have not worked.** True. But a number of developments could make a big difference. "The major sin of the past with institutions is that they became de facto prisons," says Patrick Murphy, public guardian in Cook County Juvenile Court in Chicago. Residential facilities that have opened in the last decade have had some success by separating children by age and need, and by providing a range of services—from intensive therapy for emotionally disturbed kids to short-term placement for children who will be returned to their natural family or placed for adoption.

■ **Orphanages do not encourage family reunification.** If used as a temporary refuge, group homes can be an effective tool in allowing families to overcome crises. Many foster homes discourage visits, and natural parents may feel threatened by foster parents. Small homes with staffs trained to understand children's and families' situations can maintain contact between parents and children and deal with problems as they arise. But, until there is a long-term national program providing for family intervention, drug-treatment programs, day care, housing programs and education, many children could be safer in orphanages.

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UPDATE: OHIO VETERANS' CHILDREN'S HOME

LEGISLATIVE OFFICE OF EDUCATION OVERSIGHT
COLUMBUS, OHIO
May 1993

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UPDATE:
OHIO VETERANS' CHILDREN'S HOME

OHIO VETERANS' CHILDREN'S HOME: UPDATE

The Legislative Office of Education Oversight (LOEO) serves as staff to the Legislative Committee on Education Oversight. Created by the General Assembly in 1989, the Office evaluates education-related activities funded wholly or in part by the state of Ohio.

This report assesses the progress the Ohio Veterans' Children's Home has made in implementing recommendations from a 1991 study conducted by LOEO.

This is a report of the Legislative Office of Education Oversight to the Legislative Committee on Education Oversight. ***Conclusions and recommendations in this report are those of the LOEO staff and do not necessarily reflect the views of the Committee or its members.***

BACKGROUND

The Ohio Veterans' Children's Home (OVCH) is a 500-acre state-operated residential facility and school located in Xenia. The Home was established in 1869 to care for orphans of Civil War soldiers and sailors. In 1978, OVCH's mission was expanded to include children of nonveterans.

In May 1991, LOEO completed a study of the educational and related services of the Home. Shortly thereafter, another study was completed by a task force under the direction of Ohio's Lieutenant Governor. The following concerns about OVCH were identified by LOEO and supported by the Lieutenant Governor's study:

* Unclear mission. OVCH as an institution appears unclear about what it is to do, for whom, and why;

* Fragmented services. There is little coordinated planning for individual children and little communication among staff;

* Emphasis on control rather than treatment. The staff's efforts are directed toward controlling the children's behavior and making them adjust to the institution, rather than preparing children for life in the community; and

* Isolation. The facility is geographically remote from most of its residents' homes, and its staff appears isolated from current thinking and even basic state policy in child care and education.

SCOPE AND METHODS

LOEO used the following process to assess the Home's progress since the 1991 study:

LOEO interviewed in person: two current OVCH board members and one former member; three members of the OVCH administration; the principal and four teachers of Woodrow Wilson School; the assistant dean of resident life and two houseparents; two social workers; and twelve residents. Three classrooms were observed at the school. Telephone interviews were conducted with members of nine organizations that have working relationships with OVCH.

LOEO examined: the social service files of 13 randomly selected residents (10 percent of current enrollment); administrative records and documents (including minutes from the OVCH Board of Trustees' meetings since October 1991); the fiscal year 1992 state audit report; and the 1992 report on OVCH by the Ohio Department of Human Services and the Ohio Department of Mental Health.

CURRENT STATUS OF OVCH

OVCH is a public child-care facility administered by a board of trustees appointed by the Governor. The board is solely responsible for developing and approving OVCH policies and procedures, and appoints the superintendent to act as the chief administrator of the Home.

OVCH is exempt from Ohio Department of Human Services (ODHS) licensing requirements. The Ohio Department of Education's (ODE) check on compliance with the Minimum Standards for Elementary and Secondary Schools is the only routine, external oversight of the Home. Currently, ODE is questioning whether OVCH's Woodrow Wilson School meets these minimum standards.

In July 1991, the board was expanded from five to nine members, and in October a new superintendent was hired. According to the Lieutenant Governor's study, expansion of the board of trustees and hiring a new superintendent were "intended to bring OVCH out of its relative isolation and establish credible oversight."

On February 14, 1993, the superintendent was replaced. Statements in this report are attributable to the former superintendent.

The residential population of OVCH, as of December 1, 1992, was 118 children. Of these, 38 percent are female and 62 percent are male. The median age is 16. For the twelve-month period beginning December 1, 1991, OVCH cared for a total of 216 children; 85 children (39 percent of OVCH's population) were discharged during this period.

Children are admitted to OVCH from 41 counties around the state. Montgomery, Franklin, and Hamilton counties account for 30 percent of the admissions. Parents placed 68 percent of these children, the juvenile court system placed 24 percent, and county children's services agencies placed eight percent.

OVCH, as a 24-hour facility, currently employs 178 persons. Of these, nine percent are social service or nursing staff, 10 percent perform administrative functions, 25 percent are education staff, 27 percent are residential staff, and 29 percent are kitchen, maintenance, or security staff.

LOEO FINDINGS

LOEO's 1991 report included recommendations in three general areas:

* Accountability and oversight;
* Mission and role; and
* Quality of services provided.

Findings in this report are organized around these same general areas.

Accountability and Oversight

The Home is supported primarily by state General Revenue Fund (GRF) appropriations, receiving $14.3 million for the 1991-1993 biennium. This represents 90 percent of OVCH's total budget. The 1992 state audit reported that the Home received no major federal financial assistance.

To reduce OVCH's reliance on GRF funding, both the LOEO and the Lieutenant Governor's studies recommended that OVCH expand its funding base to include federal Title IV-E funds, Medicaid, third-party payers, and payments from parents and agencies who place children in the Home. With an expanded funding base, OVCH would be accountable to the sources of funding for providing a minimal quality of services to residents.

OVCH efforts since 1991, however, have been limited to seeking additional private donations, and several interactions with the Ohio Department of Human Services about Medicaid funding.

Licensure

LOEO believes that the most important recommendation offered by the 1991 LOEO and Lieutenant Governor's studies pertains to licensure. Licensure would ensure that residential-care practices at the Home meet minimum standards; OVCH would be held accountable to an outside state-level authority; and OVCH would be eligible for certain state and federal funds.

As noted, ODE's check on whether the school complies with the state's minimum standards is the only external oversight of the Home. ODE's monitoring of compliance, however, does not address the quality of the educational services to residents.

Nonetheless, the board has expressed reservations about becoming licensed. According to one board member, the board would prefer to meet the requirements without actually seeking a license. Neither the board of trustees nor the superintendent sees licensure as a priority, and both are "unsure what licensing will actually do for them." OVCH says they are getting "very mixed signals from the Ohio Department of Human Services regarding the benefits of licensure." An ODHS representative said that OVCH has made no effort to seek a license.

OVCH Mission and Role

The new board and administration have developed a mission statement. Although OVCH records indicate that there has been a recent shift in admissions to older children, the new mission statement does not indicate a target population to be served by the Home. The 1991 LOEO recommendations specifically addressed the need to focus services provided by the Home on a specific target population.

The Lieutenant Governor's study specifically recommended, "that it [OVCH] function as a model residential treatment center for troubled adolescents." LOEO's 1991 report also emphasized the need for the Home to provide treatment to its residents. Nonetheless, the mission statement does not mention "treatment."

The only written criteria used for admissions are age, veteran status of parent or other relative, number of previous placements, family income, and possibility of

reunification. There is no criterion for assessing the match between prospective residents' needs and the services offered by OVCH.

According to the Ohio Department of Human Services and Ohio Department of Mental Health report:

> The intake and admission process to OVCH requires reconsideration. Criteria for admission appears to be too broad and does not take into full consideration the notion of 'best interests of the child'. . .

Although OVCH reportedly does not actively recruit children under the age of 12, they will admit children as young as age six "in an effort to keep siblings together." In response to this practice, this same study states:

> Children who are siblings of children to be placed should not be considered for admission unless sibling(s) require placement at a setting such as OVCH due to their individual needs.

The superintendent said the board desired to better match the residential population with the number of staff. He described the situation as "being in a numbers game with the legislature." The superintendent said that in order to increase the population the board has overruled his recommendations and voted to admit children that would otherwise not have been admitted to the Home.

Sixty-eight percent of children at OVCH are admitted by their parents without the involvement of courts or county children's services agencies. For many children, OVCH is the first placement outside the family. These practices seem in direct contradiction to the provisions of Amended Substitute Senate Bill 89, the 1988 Ohio child-welfare law. Senate Bill 89 requires a court to determine whether reasonable efforts have been made to prevent the removal of a child from the family.

Description of OVCH residents

According to the 13 social service files of residents examined by LOEO, OVCH continues to admit children with very different, and sometimes very serious psychological and emotional needs. For example, seven of the 13 children were receiving mental health services prior to admission to OVCH, including three who had previous admissions to psychiatric hospitals.

Nine of the 13 files included information about serious psychological problems resulting from children being sexually abused, locked in containers, or left alone for long periods of time. Yet only one of the nine files indicated that mental health services were currently being provided.

Although administrative and social service staff reported individual and group counseling are now being provided to residents, this generally occurs only one day a week. Information about these services was not included in the files LOEO reviewed. Teachers indicated that residents need more counseling.

Quality of Services

OVCH is both a residential facility and a school. As such, it is difficult to evaluate the educational programs without considering how the facility's other services enhance or detract from its educational mission. It is equally difficult to evaluate OVCH's social services activities without reference to the educational program.

Both the 1991 LOEO and Lieutenant Governor's studies found that many residents were not receiving the services necessary to meet their emotional, psychological, and educational needs. OVCH has improved some of its services, but others need further improvements.

Improved services

The following services have been improved since the last LOEO site visit:

* Woodrow Wilson School has expanded to a trimester system, allowing students to attend school year round;

* The Ohio Department of Education (ODE) is in the process of approving approximately three severe behavior handicapped (SBH) units and one learning disabled (LD) unit for Woodrow Wilson School;

* Three special education teachers with LD or SBH certifications have been hired;

* Staff development activities are more available to residential, social services, and educational staff;

* OVCH now provides some individual and group counseling, and is negotiating with outside sources to provide additional counseling; and

* OVCH offers more recreational and community activities to residents.

Further improvements needed

During LOEO's interviews for this report, OVCH staff provided conflicting and inconsistent responses to questions regarding the educational and related services at OVCH. This is an indication of poor communication and the absence of some necessary policies at the Home. For example, among three administrators interviewed, two said that solitary confinement was used for discipline; the other said it was not.

Assessment of residents. The superintendent said that "residents receive a complete test battery upon entrance to OVCH." Residents are reportedly given a complete medical examination and psychiatric evaluation. However, there were conflicting reports from administrative personnel, social workers, teachers, and houseparents about which tests, if any, were given. Files reviewed by LOEO are incomplete and most contain only out-dated evaluation information.

Teachers interviewed by LOEO had different ideas about which educational assessments were given. Moreover, teachers reported that the assessments were too limited in scope to be useful for planning lessons. Although there were only four to eight students enrolled in the three classes LOEO observed, no attempt was made in these classes to tailor lessons to meet the needs of different students.

Only two of the 12 residents LOEO interviewed said that they were given any test soon after they were admitted. All the residents LOEO interviewed said that no one informed them of what services they should receive based on their individual needs.

According to the Ohio Department of Human Services and Ohio Department of Mental Health report, residents receive very little assessment upon entrance into OVCH:

> There is no real casework treatment or differentiated service provision at OVCH. The children who are in the facility who have special needs are not being served appropriately. This is, in part, due to the fact that the children have not been comprehensively evaluated and assessed.

This same report went on to say that, "I.E.P's [individual education plans] were only two pages in length and were identical for each child. . . . The ITP's [individual treatment plans] were more recent, but virtually identical in substance."

Without testing or assessing residents upon admission, OVCH has no way of knowing residents' educational, psychological, or emotional needs and which services should be directed to address those needs.

Coordinated planning and communication among staff. As a 24-hour residential facility, OVCH should require communication among all staff and coordination of services on behalf of the children. However, coordinated services and communication appear to be the exception at OVCH. For example, only one of the 13 files reviewed by LOEO contained evidence of communication among care providers. Only half of the files contained an individual treatment plan.

In addition, no progress notes or ongoing charting about the child or the services he or she is receiving were found in any of the 13 files. Except for date of birth, there was no consistent set of information across the files reviewed.

Everyone LOEO interviewed mentioned that communication between houseparents and teachers is difficult because they are on different shifts. Individual houseparents or teachers may choose to initiate contact through written reports or meetings on their off-duty hours, but the current scheduling does not allow for their work hours to overlap. Houseparents said "there is no formal policy" concerning communication among staff.

Communication between social workers and houseparents is a major problem. Some staff said social workers do not respect houseparents as professionals, and therefore are hesitant to share information with them. Social work staff report that increased responsibilities for screening and admissions prohibit them from spending more time working with other OVCH staff and students.

One houseparent said, "OVCH is weak in coordinated planning. Houseparents are kept out of the loop. Communication is a problem." Another houseparent said:

> It's horrible. Lack of communication is a big problem. There is no real coordination . . . social workers do things without consulting houseparents. There are no regular meetings of houseparents with other staff or among houseparents. Houseparents have to rely on what kids tell them.

In fact, LOEO was told of instances where students suddenly appear in classrooms and cottages with no prior notification to teachers or houseparents that the child is coming.

Discipline. The single concern expressed most frequently by OVCH staff was discipline. The discipline policy was described by most staff interviewed as inconsistent and subjectively administered. In addition, many indicated that "the punishment often does not fit the crime." The administration, however, voiced no concern with the discipline policy.

The policy provides for three levels of "citizenship." Citizenship status determines which campus privileges are awarded, and which are withheld. One teacher described the discipline policy as "[it] assumes it's a home for Mother Theresa candidates." Staff said the policy works poorly for the children who are serious discipline problems.

Teachers interviewed said some children are out of control and do whatever they want because they know nothing will happen to them. Houseparents expressed similar frustrations with the lack of discipline. Six of the 12 residents interviewed expressed that a consistent discipline policy needs to be established.

Discharge planning. Administrative staff and board members expressed that OVCH's goal is to keep children until graduation, regardless of their age at admission. They characterize OVCH as a long-term care facility.

According to Senate Bill 89, a child should remain with his or her parents unless there is "clear and convincing evidence that the child cannot be returned to either parent within a reasonable time [reunification]." The superintendent said that OVCH believes in the "reunification" provisions of S.B. 89. He says OVCH works to reunify children with their families if the family is "reasonably intact."

However, there was little evidence in the social service files that reunification is actively pursued or that a reunification policy or procedures even exist. Although social service staff say status reports are sent home, there was nothing in the files to support this claim. Based on administration and staff interviews, OVCH's reunification efforts appear to be limited to periodic phone calls to parents or guardians.

According to the administrative personnel interviewed by LOEO, a common practice among parents is to suddenly take their children from OVCH. Thus, although OVCH reports that 40 percent of the residents discharged from December 1, 1991 to November 30, 1992 returned to their families, it does not appear to be due to OVCH's reunification efforts.

Senate Bill 89 requires that discharge planning begin as soon as a child is admitted. One houseparent said, however, that "usually graduating seniors are the ones that have a laid-out plan, and are being prepared to leave." Teachers also noted that preparation of children for return to their homes and communities was generally limited to graduating seniors.

Finally, although section 5909.16 of the Ohio Revised Code requires OVCH to track residents who have been discharged from the Home, OVCH has no formal procedure for doing so. In response to questions about tracking discharged residents, OVCH staff reported, "Nothing is organized . . .there is nothing formal."

CONCLUSIONS AND RECOMMENDATIONS

In sum, there have been improvements in the educational and related services at OVCH, including a more developed special education program, efforts to improve staff development and training, and enhanced recreational and community activities.

There are, however, a number of major concerns outlined in the 1991 report which have not been addressed by the Home. A mission statement is needed which targets the specific ages and needs of children to be served. Treatment is absent as an integral part of the residential experience. Lack of coordination and communication among staff results in fragmented services.

LOEO believes the recommendation which could have the most substantial impact on <u>all</u> OVCH operations is the one that the board of trustees appears to be consciously avoiding--that of licensure. Exemption from licensure isolates staff from current child-care policies and practices. No other child-care facility in Ohio is exempt from licensing requirements.

LOEO RECOMMENDS:

* OVCH voluntarily obtain a license from the Ohio Department of Human Services within a reasonable time, or that the General Assembly make licensure a statutory requirement. Licensure would establish minimum standards for residential care and treatment, provide state-level oversight to the facility, and make OVCH eligible for other state and federal funds.

* OVCH expand its funding base to reduce reliance on the General Revenue Fund. Other funding sources include federal Title IV-E funds, Medicaid, third party payers, and contributions to the cost of care from agencies and parents placing children in OVCH. This would make OVCH accountable to those who are providing funding.

* OVCH identify a target population using criteria that include service needs, and admit only children who are in the target population. This will allow OVCH to develop and provide services based on the needs of the children admitted.

* A multi-factored assessment (including medical, psychological, and diagnostic educational assessments) be performed on all residents before, or upon, admission to OVCH. These assessments should be thorough enough to guide treatment and classroom instruction at OVCH and to be useful to the school and community to which the child will return.

* OVCH begin to implement policies that foster coordinated planning for services and communication among all staff. Direct-line staff, including houseparents, should be empowered to provide input for developing effective discipline and other policies.